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SOME TENDENCIES INDICATED BY THE NEW LIFE TABLES¹

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The United States Census Bureau has recently issued its third volume of life tables.² This publication is abridged in the sense that the data are given for every fifth year of life (after age 2) instead of for each year of life. The tables differ from previous ones also in that they are not specific for native and foreign-born stock or for urban and rural districts. On the other hand, they will be of special interest to health officers because data for the white population are furnished separately for 23 States and 14 large cities. The tables give, for the combined years 1919 and 1920, the smoothed annual rate of mortality, the number surviving and the number dying out of 100,000 born alive, and the expectation, for every fifth year of life, for males and females of each color.

The bulletin confirms certain conclusions which had already been arrived at by various writers relative to the changes in mortality between 1910 and 1920. It will be of interest to examine the material in the report in this light.

It must be recalled that, the data being based on the years 1919-20, the results are influenced by the recrudescence of influenza in the spring of 1919 and the further wave of the epidemic in the spring of 1920.

As some readers may not be familiar with life table construction, a simple explanation of the principles may be desirable. It is assumed that 100,000 individuals are born at a certain instant of time. During the first day of their life a certain number will die, leaving less than the original 100,000 to commence the second day; similar diminutions of the original group will occur on successive days (or other interval of time), until, after somewhat more than 100 hypothetical years have passed, all will have died. The rate of loss from day to day, or year to year, may be determined from the specific mortality rates of any city or State for which a life table is desired.

¹ From the Statistical Office, United States Public Health Service.

² The United States Abridged Life Tables, 1919-1920, prepared by Elbertie Foudray, under the direction of Dr. William H. Davis. Bureau of the Census, Department of Commerce, Washington.

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In other words, these rates (when smoothed by rather complicated mathematical procedures) may be applied to the 100,000 or any part thereof alive at the beginning of any age interval to determine the number dying during that interval. The following table will clarify this:

Age interval (days).	Population at beginning of age interval.	Specific mortality rate per 1,000 for State or city.	Hypothetical deaths out of orig- inal 100,000 in the age interval.
0-30	100,000	7	700
30-60	99,300	4	397
60-90	98,903	2	198
90-120	98,705	And so on.	And so on.

In this way is obtained an age distribution of the population which is unique in that it is unaffected by immigration or emigration or by excess of births over deaths. The expectation of life (or average length of life) is obtained by weighting the age at death by the number of individuals dying at that age. Expectations are obtained for any particular age by eliminating all ages younger than the one in question.

Other values are included in the usual life table, but need not concern us. The life table mortality rates used in this paper refer to the smoothed specific rates for the actual population.

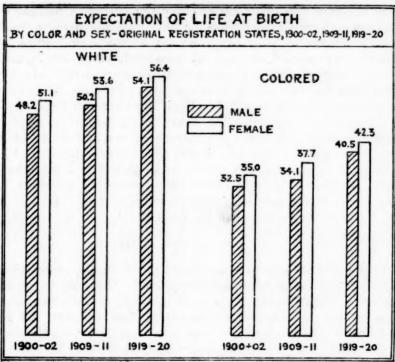
IMPROVEMENT IN EXPECTATION AT BIRTH.

Figure 1 presents the expectation at birth (mean after-lifetime) for white and colored persons of each sex, during the years 1900–1902, 1909–11, and 1919–20, for the group of "original registration States." It is evident that, so far as expectation at birth is concerned, the decade 1910–1920 has witnessed the same general progress as the previous decade. The females still have a better expectation than the males, in both white and colored populations. The colored show even more improvement than the white in expectation at birth in the past 10 years. In general it may be said that they have about the expectation at birth which the white had 30 or 40 years ago. Since the 1919–20 data cover years in which influenza was epidemic, the real gains are presumably greater for both white and colored than those indicated in the graph.

TREND OF EXPECTATION AT EACH AGE.

But we must not forget that expectation at birth tells only part of the story. It is necessary to consider the expectation at each age. Table 1 gives the data.

³ These States are as follows: The New England States, and New York, New Jersey, the District of Columbia, Indiana, and Michigan.



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Fig. 1.

Table 1.—Expectation of life in the original registration States at certain exact ages, by color and sex, 1900–1902, 1909–1911, and 1919–20.

		Averag	e numb	per of ye	ars of li	fe rema	ining to	individ	uals of	specifie	d ages.	
			WI	uite.			Colored.					
Exact age in years.		Male.		Female. Male,			Female.					
	1900- 1902	1909- 1911	1919- 20									
0	48.2	50.2	54.1	51.1	53. 6	56. 4	32.5	34.1	40, 5	35, 0	37.7	42.
1	54.6	56.3	58, 5	56.4	58.7	59.9	42.5	42.5	46. 2	43.5	45. 1	47.
2	55. 5	56. 9	58.6	57.2	59. 2	59.9	45.0	44.5	47.5	45. 8	46.9	48.3
7	53.0	53.9	55.3	54.6	56.1	56. 4	44.0	42.9	45. 1	44.9	45, 1	45.
2	48.9	49.6	51.0	50.4	51.8	52.0	40.4	39.1	41.0	41.7	41.3	41.
7	44.6	45.2	46.7	46.1	47. 4	47.6	36.9	35. 4	37.4	38.6	37.9	38.
22	40.7	41.1	42.7	42.3	43.3	43.6	33.9	32.3	34.6	35.7	34.9	35.
7	37.1	37.2	38.8	38.6	39.3	39.8	31.1	29. 2	31.7	32.6	31.6	32.
32	33. 4	33.3	34.9	35.0	35. 4	36.1	28.0	26. 2	28.5	29.4	28.3	28.1
37	29.9	29.6	31.1	31.4	31.6	32.3	24.9	23.3	25.4	26, 3	25. 2	25,
12	26.3	26.0	27.3	27.7	27.7	28.4	21.9	20.5	22.3	23.1	22.2	22.
17	22.8	22.5	23.6	24.1	24.0	24.5	19.0	17.7	19.3	20, 3	19.3	19.
52	19. 4	19.0	19.9	20.5	20.3	20.8	16. 2	15. 2	16. 5	17.5	16.5	16. 3
7	16.2	15.8	16.5	17.1	16.8	17.3	13.9	12.9	13.8	14.9	14.1	14.
32	13.2	12.9	13.4	14.0	13.7	14.0	11.7	10.9	11.4	12.7	12.0	12.1
57	10.5	10.3	10.6	11.1	10.9	11.1	9.5	9.0	9.3	10.7	10. 2	10. 2
2	8.1	7.9	8.2	8.6	8.5	8.7	7.6	7.4	7.6	8.9	8.5	8.4
7	6.1	6.0	6.2	6.5	6. 4	6.6	6.0	6.1	5.9	7.3	6.9	6. 9
2	4.5	4.6	4.5	4.9	4.8	5.0	4.7	5.1	3.9	5.9	5.6	5. 1
7	3.4	3.5	3.2	3.6	3.6	3.7	3.7	4.3	2.3	4.6	4.9	3. 4

¹ Data for 1900-1902 and 1900-1911 from 1890-1910 United States Life Tables; data for 1919-1920 from United States Abridged Life Tables.

All the figures in this table are from the 1919-20 Life Tables of the Census Bureau, except those for 1900-1902 which come from a previous volume of life tables. So far as the males (white and colored) are concerned, the gains indicated by the crude data are maintained. As Figure 2 shows, up to extreme old age the white and colored males have made a steady gain in expectancy. In old age the data must be regarded as quite unreliable. Their appearance of regularity is, of course, due to the smoothing process. The two upper graphs in Figure 2 compare the three periods for each sex, and the two lower repeat the curves in order to compare the two sexes directly. From 1900 to 1910, although the colored males gained in expectation at birth, they lost heavily in expectation at nearly every other age. These losses have now been more than made good. In fact, the colored gains are greater than the white.

IMPROVEMENT IN LONGEVITY AT MATURE AGES.

In the case of both sexes and colors the decline in expectation in middle life noted in 1910 has disappeared. This fact was pointed out in the Public Health Reports of March 3, 1922, on the basis of data for the expanding registration area,⁵ and attention has been called to it by a number of writers, who have dealt with the results in certain States. Special attention may be called to an article by Gladden W. Baker.⁶

This improvement in longevity at mature ages is the first significant fact to which it is desired to call attention. The decline in expectation in 1910 over 1900 at these ages created a great deal of comment and speculation as to whether such a tendency would continue. Newsholme, in commenting on this matter before life tables for 1919–20 were available, suggested that the United States might anticipate an early extension of the reduced death rate to all ages, paralleling changes which had previously taken place in England and one or two States in this country. This situation seems to have already been realized. Figure 3 indicates that the improvement at mature ages is consistently maintained by the male populations of all important States and cities for which data for the two periods have been worked up into life tables.

⁴ United States Life Tables, 1890, 1901, 1910, and 1901-1910. Prepared by James W. Glover. United States Bureau of the Census, 1921.

Death rate in every age group lower in 1920 than in 1910. Pub. Health Rep., Mar. 3, 1922, p. 487.
 The trend of adult mortality in the United States. By Gladden W. Baker. Jour. of Am. Statistical Assoc., September, 1923, p. 852.

National changes in health and longevity. Sir Arthur Newsholme. Quarterly Pub. of the Am. Statistical Assoc., June, 1921, p. 689.

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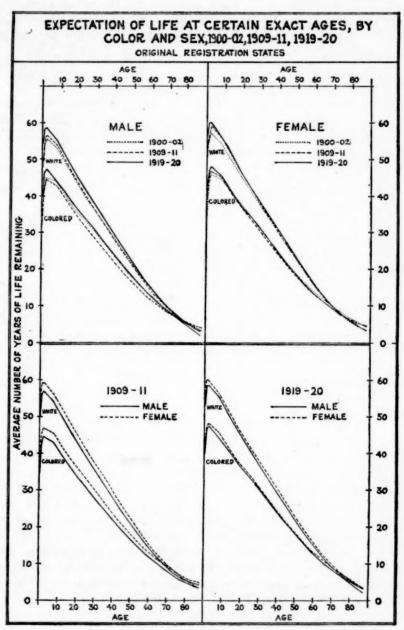
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MORE RAPID DECLINE IN MORTALITY IN URBAN DISTRICTS.

From 1900 to 1910 there was a tendency for the urban mortality rates to fall more rapidly than the rural. This is well indicated in Table 2, giving the life table mortality rates * for white persons in urban and rural districts, by sex and age.

Table 2.—Urban and rural life table specific mortality rates for white persons in the original registration States, at certain exact ages, 1900-1902 and 1909-1911.

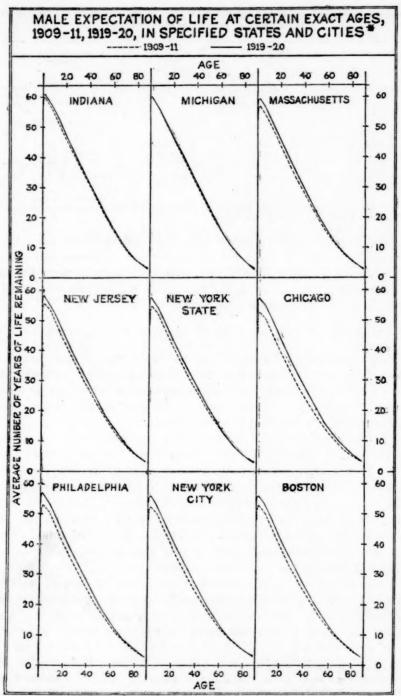
Age.		nual rates 1,000.		nual rates	Ratio of rate for period 1909-1911 to that for years 1900- 1902 (100-1900- 1902 rate).		
,	1900-1902	1909-1911	1900-1902	1901-1911	Urban.	Rural.	
	MAI	LE.					
6. 10. 20. 30. 40. 50. 60.	151, 0 3, 0 6, 3 9, 5 13, 5 20, 3 38, 1 73, 1	133, 8 2, 6 4, 9 7, 2 12, 1 19, 2 38, 5 74, 2	109. 0 2. 3 5. 0 5. 8 7. 1 10. 7 21. 7 51. 5	103.3 2.1 4.8 5.4 7.1 10.7 22.9 52.9	89 87 78 76 90 95 101 102	95 91 90 93 100 100 105	
	FEMA	LE.					
0	125. 5 2. 5 5. 4 8. 3 10. 7 16. 3 31. 3 63. 1	111. 2 2. 2 4. 1 6. 3 8. 8 14. 4 30. 7 63. 5	89, 8 2, 1 5, 5 6, 8 7, 5 10, 4 20, 1 46, 3	85.0 1.8 4.4 5.5 6.7 9.9 20.1 49.9	89 88 76 76 82 88 98	95 86 80 81 89 95 100 108	

¹ From 1890-1910 U. S. Life Tables.

Figure 3 suggests that the greater decline in mortality in cities has continued during the past ten years; in other words, that there has been a greater increase in expectation of life in the cities. Chicago, Philadelphia, New York City, and Boston all show a greater increase in expectancy than any of the five States. Since urban and rural districts are not tabulated separately in the present volume of life tables, no direct comparison can be made.

Although the urban rates appear to be falling more rapidly than the rural, they are still much higher, as may be seen by comparing the expectation in large cities with the expectation in the States in which they are located. This is done in Table 3.

^{*} It should be noted that the life table specific mortality rates used in this paper were obtained by the Census Bureau by smoothing the figures for the actual number of persons living in each age group and for the actual number of deaths occurring in each age group. They are distinct from the average annual death rate per 1,000 of population in current and all older age intervals, based on a stationary population—a rate used in most life tables, but not employed in this paper.



* FIGURES FOR 1909-11 ARE FOR BOTH COLORS; THOSE FOR 1919-20 FOR WHITE ONLY.

Table 3.—Expectation of life among white persons in certain cities ¹ and in the States in which they are located, 1919-20.²

	Averag	e number of life—	of years		Averag	e number of years of life—		
Cities.	Expected in city.	Expected in State in which city is located.	Excess of State expecta- tion over city.	Cities.	Expected in city.	Expected in State in which city is located.	Excess of State expecta- tion over city.	
Los Angeles	53. 5 52. 5 52. 4 52. 3 52. 2 52. 1	54. 5 56. 2 55. 2 56. 8 53. 3 55. 1	1. 0 3. 7 2. 8 4. 5 1. 1 3. 0	San Francisco New York Baltimore. Boston. Buffalo. Pittsburgh.	51. 8 51. 6 51. 5 50. 6 49. 6 47. 2	54. 5 52. 8 53. 8 54. 1 52. 8 53. 3	2. 7 1. 2 2. 3 3. 5 3. 2 6. 1	

New Orleans omitted, since there are no data for the whole State. Washington, D. C., also omitted.
 Data from United States Abridged Life Tables.

Possibly an important reason why the rural rates are not falling so rapidly is that they are already closer to a minimum rate-i. e., a decline from 11 to 10 deaths per 1,000 will clearly be more difficult than a decline from 15 to 14, and such gains will become increasingly difficult as the minimum is approached.

INCREASE IN FEMALE MORTALITY RATES AT CERTAIN AGES.

As pointed out by recent writers, the improvement in expectation at each age noted in the case of males, is not so evident in the data for females. In fact, except for expectation at birth, only slight progress would appear to have been made in the past decade, if the years 1919-1920 are taken to be representative.

Returning to Figure 2, we note that the expectation of life for white females shows very little change from 1910 to 1920 at most ages. Some improvement may be observed after the 30-year mark, but the tendencies manifested from 1900 to 1910 have not continued. The expectancy for colored females has improved slightly since 1910; but, except for childhood, they have failed entirely to recover the ground lost from 1900 to 1910. The two lower curves indicate that the traditional advantage held by the females over the males in longevity has been considerably reduced.

Expectation curves are cumulative, and a more precise view of the relations at each age is observable from the smoothed specific annual mortality rates from which the expectation curves were The Census volume also gives these rates. that a reverse relation will hold here—a fall in the curve from one period of time to another will mean an increase in length of life. Table 4, therefore, gives the life table mortality rates for 1919-20, by color, sex, and age, using, as before, the rates at certain exact ages.

Table 4.—Specific life table annual mortality rates per 1,000 in the original registration States at certain exact ages, by color and sex, 1900-1902, 1909-11, and 1919-20.

			W)	nite.			Colored.						
Exact age in years.		Male.			Female	Male.			Female.				
	1900- 1902	1909- 1911	1919- 20	1900- 1902	1909- 1911	1919- 20	1900- 1902	1909- 1911	1919- 20	1900- 1902	1909- 1911	1919- 20	
0	133. 5 34. 5	123. 3 28. 2	92. 4 18. 8	110.6	102.3 25.8	73. 6 16. 9	253, 3 77, 3	219.3 66.8	144.9	214.7	185. 1 58. 8	120.3	
2	15.8	12.7	9.1	14.8	11.4	8, 2	34.3	32.1	18.3	35, 3	24.5	16. 1	
7	4.2	3.4	3.3	3.9	3.1	2.8	8.1	6. 2	5, 4	8.5	5, 8	5.7	
2	2.6	2.3	2.3	2.4	2.0	1.9	6.5	5, 6	4.9	8.4	6.4	4.5	
7	4.3	3.5	3.9	4.3	3.3	3.5	10, 1	9.7	10.9	11.1	10.6	10.8	
2	6.7	5, 4	5.0	6, 2	4.7	5.4	12, 5	12.5	13.0	11.3	10.6	10.7	
7	7.3	5.8	5.9	7.1	5, 5	6.6	13, 2	. 12. 8	11.7	11.0	10.3	11.4	
2	8.5	7.3	6.9	8.1	6.5	6.9	13, 6	16.2	13, 1	12.5	13.1	12.	
7	9.9	9, 2	7.7	8.7	7.5	6.9	15, 8	18.4	15, 3	14.2	15.1	14.3	
2	11.2	11.0	9.1	9.8	8.6	7.8	17.8	22.5	18.0	17.1	19.0	17.1	
Ţ	13.7	13, 8	11.1	11.6	10.9	10.0	24.3	26.5	20, 9	23.3	23. 1	20. 3	
2	17.1	17.2	14.9	15.0	14.1	13.4	28.3	34.2	27.3	24.7	27.8	28.7	
7	24.2	25. 1 35. 4	21.9	21.3	21.0	19.3	43. 2	44. 2	36, 4	37.3	40.3	41. 3	
2	32.8 48.2	50, 2	46.1	28.7 42.5	30.0	27. 5 43. 1	46. 2 61. 3	55.8	48.7	42.9	50.0	50. 2	
7	68, 6	72.3	69.3	63.0	66.3	64.0	84.7	70. 9 93. 9	65. 7 88. 9	60.9 71.5	66.5	60. 0 80. 2	
7	104.4	108.0	102.1	94.9	96.1	94.6	114.1	124.8	103, 1		75.7		
2	155. 4	158.3	150.8	141.2	149.1	139, 4	150.1	146, 1	151.3	95. 5 117. 4	98. 4 136. 8	95. 9 120. 7	
7	218.6	215.5	212.0	200. 3	202, 1	196, 0	207.3	196. 7	198, 3	159.9	170.0	146. 7	

¹ Data for 1900-02 and 1909-11 from 1800-1910 United States Life Tables; data for 1919-20 from United States Abridged Life Tables.

The data are shown in Figure 4 on a semilogarithmic scale, in order to place the changes on a percentage basis. The curves on the left compare the two sexes for each period, and the same curves are repeated on the right to compare the three periods for each sex. The extraordinary elevation in the 1919–20 curve for females for the ages 20 to 30 is quite marked, and centers attention on these 10 years.

The Metropolitan Life Insurance Company calls attention to this phenomenon among their policy-holders. The Census Bureau has also observed the changed relation and publishes in the Abridged Life Tables, 1919–1920, a special table giving by age the excess mortality rate of one sex over the other, by States, in 1919–20, together with the data for the original registration States for 1909–1911 and 1919–20. Table 5 reproduces the data for the whole group of States, using, however, percentage differences instead of excess rates.

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[•] Statistical Bulletin, Metropolitan Life Insurance Company, May, 1923.

¹⁰ Cf also, Changes in mortality in the last two decades in New England, New York, New Jersey, Michigan, Indiana, and the District of Columbia. By Elbertie Foudray, U. S. Bureau of the Census. American Journal of Public Health, Vol. XIII, No. 8, August, 1923.

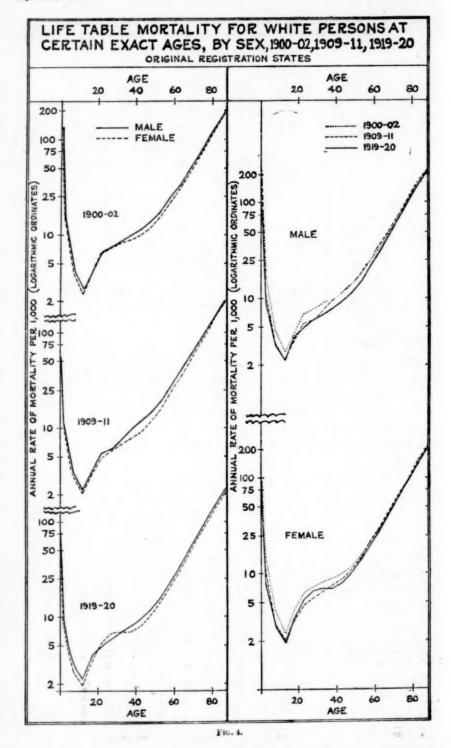


Table 5.—Percentage by which the white mortality rate in one sex exceeds that in the other sex, 1900-02, 1909-11, and 1919-20, for the original registration States, and 1919-20 for a group of States as a whole.\(^1\)

	28 81	ates.2	Original registration states.								
Exact age in years.	191	9-20	190	0-02	190	9-11	1919-20				
	Male excess.	Female excess.	Male excess.	Female excess.	Male excess.	Female excess.	Male excess.	Female excess.			
0	20. 2		17. 2		17.0		20, 3				
1	10. 1		9.9		8.5		10, 1				
2	8.4		6.3		10.2		9.9				
7	13.6		7.1		8, 8		15. 2				
2	14.1		7.7		13, 0		13.0				
7	12.2		0		5, 7		10.3				
2		8.9	7.5		13.0			7.			
7		11.3	2.7		5, 2			10.			
2		15, 8	4.7		11.0		0				
7	7.4	1000	12. 1		18.5		10. 4				
2	12.7		12, 5		21.8		13. 2				
7	10.3		15.3		21.0		9,9				
)	10.3		12.3		18.0		10.1				
7	11.9		12.0		16.3		11.9				
2	10.9		12.5		15. 3		9.5				
	8.7		11.8		12.4		6, 7				
	81		8.2		8.3		7.5				
7	6.5		9.1	********	11.0		7.3				
	7.0	********	9. 1	********	5. 8	*******	7.6				
2		********	8.4	*******	6, 2	********	7.5				
7	6.3	********	8.4	********	0, 2		1.0				

¹ Excess for 28 States computed from data given in 1919-20 U. S. Abridged Life Tables; that for original registration States computed from data in Table 6 of this paper.
² Including the District of Columbia. The States are Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, Pennsylvania, Maryland, Virginia, North Carolina, South Carolina, Tennessee, Kentucky, Ohio, Indiana, Illinois, Michigan, Wisconsin, Minnesota, Missouri, Kansas, Utah, California, Oregon, and Washington.

It is manifest not only that there is at present an excess of mortality among young adult females, but also that this excess is a phenomenon of the present tables and did not show itself in 1900-02 or 1909-1911.

Table 6 was prepared to indicate the geographical distribution of this excess.

Table 6.—Ratio of mortality among white females to that among white males, by age, for each of 23 States, 1919-20.1

[Mortality of males at the given age = 103. Ratios below 103 therefore indicate a male excess and are in hold face type 1

		DON	d face (ype.j								
State.	Average of ratios for ages	Age.										
atate.	22, 27, and 32.	12	17	22	27	32	37	42	47	52	57	
Kentucky	134	97	100	128	140	134	115	105	104	102	102	
Indiana	131	99	97	134	131	128	105	101	109	102	92	
Tennessee	129	95	101	124	137	125	121	106	116	104	96	
Michigan	127	90	93	130	138	113	108	102	109	103	91	
North Carolina	118	83	100	117	116	120	110	109	109	97	96	
Wisconsin		84	77	118	122	102	102	95	97	94	94	
Ohio	113	83	87	118	117	104	93	86	91	89	89	
Kansas	112	93	81	106	116	115	112	105	107	102	99	
Minnesota		84	87	112	121	102	102	97	96	93	93	
Missouri	111	93	85	108	117	109	97	92	89	89	81	
Maryland	110	85	100	121	110	99	88	86	85	82	87	
Illinois	109	87	85	111	116	99	90	86	83	87	8	
Oregon	108	83	77	127	102	96	90	103	100	90	81	
Massachusetts	108	85	91	113	106	105	94	90	92	92	86	
South Carolina	108	76	85	93	115	115	116	95	89	92	87	
Utah	105	88	85	114	100	101	98	84	69	88	76	
Pennsylvania	104	86	89	107	107	99	86	81	82	87	86	
Virginia	103	79	81	99	111	99	118	96	103	107	91	
New Jersey	102	86	93	100	114	92	86	81	80	88	84	
Connecticut	101	75	73	101	103	98	84	80	84	87	81	
New York	98	86	87	98	105	91	80	81	84	84	86	
California	92	74	80	98	92	85	73	71	78	75	72	
Washington	91	90	83	89	93	90	94	93	97	88	99	

¹ Computed from life table mortality rates, 1919-20, United States Abridged Life Tables.

It is evident that there is a wide variation, from California and Washington, with no excess at all, to Kentucky with an excess at each age from 17 to 57 years. If we consider the three ages, 22, 27, and 32, at the period when the excess is most marked, we find that it is greatest in the central and Lake States (cf. fig. 5). New England and other Eastern States and also the far Western States have but slight tendency for an excess of the female rate over the male at these ages.

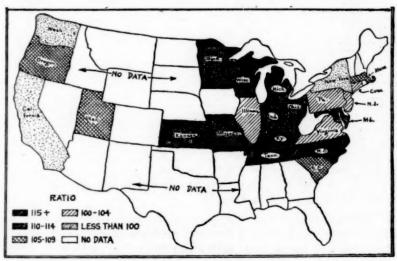


Fig. 5.—Ratio of mortality among white females to that among white males, in 23 States, 1919-20 (average of ratios for ages 22, 27, and 32).

This phenomenon is reflected in a number of causes of death, as is indicated in Table 7, based on the age group 20–24.¹⁰ All causes showed a female excess rate of 31 per 100,000 in 1920; but in 1910 the male rate was in excess by 74 per 100,000. Hence, the change in the 10-year period is best indicated by subtracting algebraically the 1910 figures from the 1920 figures, as is done in the last column.

¹⁰ The special rate volume of the Census Bureau, 1910-1920, from which these data were taken, does not give the age group 25-29 separately. Therefore, for this preliminary study, it was thought advisable to limit the table to the age group 20-24.

TABLE 7 .- Mortality rates, 1910 and 1920, for the age group 20-24, by sex and cause, with excess rates, registration States of 1910.1

		Rate pe	Rate per 100,000.				Excess rate per 100,000.			
	19	010 192		20	1910 (Male	1920 (Male	Alge- braic			
	Male.	Female.	Male.	Female.	ex- cess+).	ex- cess+).	differ- ence.2			
All causes	571	497	517	548	+74	-31	-105			
Violent causes (except suicide)		17	114	21	+133	+93	-40			
Tuberculosis (all forms)	181	199	141	182	-18	-41	-23			
Typhoid fever	47 39	26 25	111	7	+21	+2	-19			
Puerperal conditions	39	68	111	116 82	+14 68	-5 -82	-19 -14			
Children's diseases 3	6	08	5	0.3	-08	-82	-14			
Cancer.	4	4	5	5						
Acute nephritis and Bright's disease	15	18	10	13	-3	-3				
Heart, organic	21	23	21	22	-2	-1	+1			
Diabetes	4	4	6	5		+1	+1			
Cerebral hemorrhage and softening	. 3	3	3	2		+1	+1			
All other	97	99	90	85	-2	+5	+7			

From mortality rates, 1910–1920. U. S. Bureau of the Census, Table IV.
 1920 excess minus 1910 excess.
 Measles, scarlet fever, whooping cough, and diphtheria.

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Violent causes and typhoid fever have only an adventitious relation to the phenomenon. In both, the male rates are greatly in excess, and in both there has been a marked decline in the last 10 years. On the other hand, there has been an increase in a condition limited to females—puerperal causes. Tuberculosis and influenza-pneumonia are the two other conditions evidently involved in the excess female mortality in the age group 20-24. This method of treatment does not relate the excesses among young adult females to the remainder of the age curve, but it may be stated that such a comparison does not change the relations to any great extent. In other words, in general, conditions showing an excess for the ages 20-24 do not show an excess throughout all ages, and are therefore involved in bringing about the peculiar rise in the female mortality curve from 20 to 30.

The reasons for this heavy mortality among young adult females, however, are obscure, and the table is meant merely to be suggestive. Extended study is required.

CONCLUSIONS.

The recently published life tables, then, reveal the following tendencies:

- (1) Continuation of the general improvement previously noted in expectation at birth.
- (2) A somewhat greater improvement in expectation at birth among colored persons of each sex than among white.
 - (3) An increased length of life among persons of mature age—a group which in 1910 had shown a decrease in longevity.
 - (4) A more rapid decline in mortality in cities than in rural districts.
- (5) A relatively greater mortality among women, especially at the ages from 20 to 30, than in 1910.

A METHOD FOR THE ESTIMATION OF TOTAL SULPHUR IN NEOARSPHENAMINE AND SULPHARSPHENAMINE.

By ELIAS ELVOVE, Chemist, Hygienic Laboratory, United States Public Health Service.

In a previous communication ' the writer described a simplified procedure for the estimation of sulphate in neoarsphenamine. As indicated in that paper, the primary object of the determination of sulphate in neoarsphenamine is to obtain figures which, together with other analytical data, will enable us to calculate the distribution of the sulphur in the neoarsphenamine. These other analytical data, as pointed out by Raiziss and Falkov, include a determination of total sulphur. For determining the total sulphur, Raiziss and Falkov use the method of Carius. It seemed desirable to find another method for determining the total sulphur in neoarsphenamine which would be more suitable for routine work.

Hoffman and Gortner 3 have recently pointed out that one may overcome the objection to the Carius method that it is "a difficult determination" and the objection to the peroxide fusion method that it "is disagreeable, demands extreme care," etc., by adapting the Benedict-Denis method for determining sulphur in urine. In dealing with arsenic compounds containing sulphur, however, it would be a distinct advantage if we could utilize one oxidation process for quantitatively oxidizing the sulphur to sulphate and also the arsenic to arsenate under conditions which would permit the utilization of the very convenient iodometric method for determining the arsenic. This means, therefore, that the Benedict-Denis reagent ' probably could not be used for this purpose, since the comparatively large amount of copper in the solution would probably interfere with the iodometric determination of the arsenic. Besides, the possibility that some nitrate or a small amount of nitrite might occasionally remain in the final solution would introduce another factor prejudicial to an accurate iodometric determination of the arsenic, even if we were able to control the interfering effects of the copper.

In this connection it occurred to the writer that the oxidation of the neoarsphenamine by means of permanganate as is done by the Lehmann method ⁵ for determining the arsenic in neoarsphenamine might be so modified that it would also oxidize quantitatively the sulphur in neoarsphenamine to sulphate. If, instead of using the Lehmann mixture of potassium permanganate and sulphuric acid, we were to use permanganate and hydrochloric acid, we would

¹ Jour. Ind. Eng. Chem., 14, 624-625 (1922).

³ Jour. Biol. Chem., 46, 209-221 (1921).

¹ Jour. Amer. Chem. Soc., 45, 1033-1036 (1923).

This reagent is prepared by dissolving 25 gms. of crystalline copper nitrate, 25 gms. of sodium chloride, and 10 gms. of ammonium nitrate in enough water to make 100 c. c. Hoffman and Gortner use 10 c. c. of this reagent for a determination.

Public Health Reports, 33, 1012 (1918).

not only obtain the oxidizing action of the permanganic acid but could also have the advantage of the very powerful oxidizing action of nascent chlorine, with the additional advantage that the same oxidation process would enable us to determine both the arsenic and the sulphur. As a result of some preliminary experiments it appears that this plan is quite feasible. The procedure was as follows:

Placed 0.4 gm. of the neoarsphenamine (or sulpharsphenamine) in a wide, 400 c. c. beaker of Pyrex glass and dissolved 6 in 20 c. c. of 25 per cent sodium chloride. Mixed with 150 c. c. of N/2 potassium permanganate.8 Added 15 c. c. 5N HCl, mixed, and allowed to stand at room temperature for half an hour; then placed the beaker in a boiling water bath and kept it therein until the contents of the beaker evaporated to dryness. Allowed the residue to cool to room temperature and then treated with 5 c. c. 5N HCl, followed by 50 c. c. distilled water. Detached the residue from the beaker with the aid of a stirring rod and mixed well. Carefully added 6 c. c. of 3 per cent hydrogen peroxide and carefully mixed the contents of the beaker with the stirring rod. Allowed to stand at room temperature, mixing the contents of the beaker with the stirring rod at frequent intervals until the reaction with the peroxide was nearly complete. Carefully heated to boiling and titrated the hot solution with N/2 KMnO4, finally adding a small but distinct excess of the permanganate. Heated again carefully to boiling and added N/2 oxalic acid slowly, drop by drop, until the solution became colorless. Filtered 10 into a 100 c. c. flask, finally making up to the mark with distilled water and mixing well. Pipetted out 50 c. c. into a 500 c. c. Erlenmeyer flask and reserved for the arsenic determination.

The remaining 50 c. c. of the solution (representing 0.2 gm. of the original sample) was transferred into a 400 c. c. beaker and diluted with distilled water to about 150 c. c., using the dilution water appropriately for washing out the 50 c. c. pipette and the flask. Heated the contents of the beaker to boiling and added slowly, drop by drop, 5 c. c. of 10 per cent barium chloride solution. Allowed

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⁶ Occasionally a sample was encountered which did not dissolve completely, but, by thoroughly mixing with the reagents, satisfactory results were obtained.

²⁵ gms. NaCl to 100 c. c. of the solution.

⁸This solution was prepared by dissolving 15.8 gms. of the pure crystals per liter without any further standardization. By using bot water and finely powdering the solid, the latter readily goes into solution.

⁹ The time required depends to some extent on how actively the water is boiling and on how deeply the beakers are immersed in the bath. In the case of the water bath which was available for this work, it usually required about five hours. Some determinations were purposely begun late in the afternoon so as to take advantage of the evening hours. The beakers were placed in the water bath just before leaving the laboratory and next morning they were all ready for the sulphur and arsenic determinations. It was found that in this way one could easily carry out twelve simultaneous determinations besides the controls.

¹⁶ Since there is usually very little undissolved matter remaining at this point, the filtering can be carried out with little difficulty and seems preferable to using more peroxide and boiling until all is dissolved.

the precipitate to settle over night and then collected it in a Gooch crucible, dried, ignited, and weighed as BaSO₄ in the usual way.

The 50 c. c. portion of the solution in the Erlenmeyer flask was used for determining the arsenic iodometrically as in the Lehmann method. This was carried out ¹¹ by mixing with 10 c. c. concentrated H₂SO₄, cooling to room temperature, adding 2.5 gms. powdered potassium iodide, stoppering the flask and mixing until the iodide was dissolved, allowing to stand in a dark closet for an hour, and then titrating the liberated iodine with N/10 Na₂S₂O₃ as in the Lehmann method.¹²

In Table 1 are given the comparative results for total sulphur in samples of neoarsphenamine by the above method and by the sodium-peroxide method. The latter was carried out in a Parr bomb, 13 using potassium chlorate 14 as accelerator.

Table 1.—Comparison of results for total sulphur in neoarsphenamine by the sodium peroxide method and by the writer's method.

Manufacturer.	Total sulphur by sodium peroxide method.	Total sulphur by writer's method.	Difference.
"A" "B" "C" "E" "E" "I	Per cent.	Per cent.	Per cent.
	8.76	8, 79	+0.03
	7.32	7, 40	+ .08
	11.02	10, 97	05
	9.78	9, 69	09
	5.84	5, 82	02

¹ The comparative results in the case of the sample from manufacturer "E" were obtained by Mr. C. G. Remsburg of the Hygienic Laboratory.

The results given in Table 1 show a good agreement between the percentages for total sulphur by the peroxide method and by the writer's method. The slight differences are both plus and minus, and the magnitudes of these differences are quite within what may

 $^{^{11}}$ It appears that instead of adding 10 c. c. concentrated $\rm H_2SO_4$ and 2.5 gms. solid KI, equally good results may be obtained by using correspondingly more of a diluted $\rm H_2SO_4$ and a strong solution of KI. Thus in some of the experiments the titration was carried out by adding 20 c. c. of a diluted sulphuric acid (1 vol. $\rm H_2SO_4$ to 1 vol. $\rm H_2O)$ and 10 c. c. of a 25 per cent solution of KI; but since the final acid concentration is thus made lower than in the Lehmann method, it appears preferable until further work has been done along this line, to use an acid concentration as nearly equal as possible to that used in the Lehmann method.

¹¹ A control determination was carried out simultaneously, with the object of ascertaining what correction to make for the possible presence of small amounts of sulphur in the reagents used. This control contained the same amounts of all of the reagents as were used in the actual determination, excepting that 25 c. c. Sn HCl were used instead of 15 c. c. This was done in order not to leave more of the unreduced manganese residue in the control than could well be worked up with the 6 c. c. hydrogen peroxide. Since the HCl was free from appreciable amounts of sulphur and arsenic, the use of this larger quantity of HCl could not appreciably affect the correction to be applied. This control received the same treatment as was accorded the solution containing the neoarsphenamine, with the result that one control solution was finally divided into two portions as in the actual determination and thus served both as control in the sulphur determination and sho as control in the arsenic determination.

¹³ The experience in this laboratory with the bomb method has been that it is likely to produce an explosion, especially after the fusion cup has been used a number of times. The determinations by means of the Parr bomb were carried out by Mr. C. G. Remsburg of the Hygienic Laboratory.

¹⁴ J. Assoc. Official Agri. Chemists 5, 138 (1921).

be regarded as reasonable experimental errors. In Table 2 are given the comparative results for arsenic as determined by the ordinary Lehmann method and by the modification here proposed.

Table 2.—Comparison of results for arsenic in neoarsphenamine by the Lehmann method and by the modified method.

Manufacturer.	Percentage of arsenic by Leh- mann method.	Percentage of arsenic by modi- fied method.	Difference.
"A" "B" "C" "D"	19. 40 18. 37 18. 43 19. 26	19, 49 18, 29 18, 46 19, 36	Per cent. +0.09 08 +.03 +.10

The results given in Table 2 show that the agreement in the figures for arsenic by the two methods was as good as that obtained in the case of the sulphur determinations. In Table 3 are given the comparative results for total sulphur by the two methods when these were applied to samples of sulpharsphenamine.

Table 3.—Comparison of results for total sulphur in sulpharsphenamine by the sodium peroxide method and by the writer's method.

Manufacturer.	Total sul- phur by sodium peroxide method.	Total sul- phur by writer's method.	Difference.
"A". "B". "C". "D".	Per cent,	Per cent.	Per cent.
	11. 62	11. 48	-0. 14
	9. 21	9. 25	+. 04
	10. 59	10. 76	+. 17
	10. 23	10. 19	04
	12. 72	12. 64	08

The results given in Table 3 show that the proposed method for the determination of total sulphur is applicable to sulpharsphenamine as well as to neoarsphenamine. In Table 4 are given the comparative results for arsenic as determined by the ordinary Lehmann method and by the proposed modification when these were applied to sulpharsphenamine.

Table 4.—Comparison of results for arsenic in sulpharsphenamine by the Lehmann method and by the modified method.

Manufacturer.	Percentage of arsenic by Lehmann method.	Percentage of arsenic by modified method.	Difference.
"A" "B" "C" "D" "E"	22. 15 19. 81 22. 53 22. 58 20. 67	21, 89 19, 42 22, 06 22, 72 20, 67	Per cent. -0. 26 39 47 +. 14 0. 00

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ivided etermiuce an means The results given in Table 4 show a few differences by the methods compared which are a little larger than those encountered in the preceding tables. But such differences apparently have been encountered by others. Thus, on comparing the Lehmann method with a gravimetric method, Myers and DuMez¹⁵ obtained figures which, in some cases, differed by as much as 0.41 (20.34–19.93) and 0.42 (20.35–19.93) per cent. Likewise, in the comparative work carried out under the auspices of the Association of Official Agricultural Chemists,¹⁶ the maximum and minimum figures for arsenic obtained on the same sample of neoarsphenamine by the Lehmann method were 19.5 and 18.6 per cent, or a difference of 0.9 per cent. It is difficult to tell whether the observed differences are due to the same causes as those in the Lehmann method ¹⁷ or to some variable factor which has not yet been sufficiently controlled. In using this method in its present form, therefore, one should bear in mind its possible limitations.

SUMMARY.

A method is described for determining total sulphur in neoarsphenamine and sulpharsphenamine which depends on the oxidation of the sample by means of permanganate and hydrochloric acid. The results obtained by this method agreed closely with those obtained by the sodium peroxide method. In addition to the advantage that it is more suitable than either the Carius or sodium peroxide method as a routine method for the simultaneous determination of total sulphur in a comparatively large number of samples, this method apparently has also the advantage that the required treatment of the sample is closely similar to that which is used in connection with the routine determination of arsenic, so that the same treatment prepares the sample for both the total sulphur and arsenic determinations.

INCREASE IN AUTOMOBILE FATALITIES IN OHIO.

Returns compiled by the Bureau of the Census show that during 1922 there were 11,666 deaths resulting from accidents caused by automobiles and other motor vehicles (excluding motor cycles) in the death registration area of the United States (exclusive of Hawaii), that area comprising 85 per cent of the total population of continental United States in 1922. The death rate from this cause was 12.5 per 100,000 population in 1922, 11.5 in 1921, 10.4 in 1920, 9.4 in 1919,

¹⁵ Pub. Health Reports, 33, 1015 (1918).

¹⁶ Jour. Assoc. Official Agr. Chemists, 6, 463 (1923).

¹⁷ Carrying out eight determinations on the same sample of neoarsphenamine by the Lehmann method, Mr. C. G. Remsburg, of this laboratory, obtained the following figures: 19.77, 19.96, 20.24, 20.33, 20.05, 20.05, and 20.05 per cent, or a maximum difference of 0.56 per cent. In the case of another sample he obtained the following figures: 19.3, 19.11, 19.21, 18.83, 18.27, 18.46, 19.11, and 19.3 per cent, or a maximum difference of 1.03 per cent.

9.3 in 1918, and 9 in 1917. In the 27 States for which data for 1917 are available, the actual number of deaths from this cause increased from 6,014 in that year to 9,581 in 1922, the corresponding rates for these two years being 8.7 and 12.9, respectively, or an increase during the period of very nearly 50 per cent.

In a recent issue of Public Health Reports ¹ the number of deaths from automobile accidents for continental United States for 1923 was estimated at 15,700. This estimate was based on an increase in 1923 over 1922 of 13.2 per cent in the death rate from this cause

among a group of 15,000,000 insured persons.

The above figures, while showing the mortality from automobile accidents to be increasing at an alarming rate, do not relate the increase in the number of automobiles in use to the increased number of fatalities. The factor of increased number of automobiles evidently has two functions in the problem—one, that of increasing the number of fatalities in the same ratio as that of the increase in the number of automobiles; the other function involving an increase in fatalities due to the increased congestion of traffic.

These relationships as obtaining in the State of Ohio are graphically presented by means of a chart recently issued by the Ohio Public Health Association of Columbus, in a campaign directed against this appalling waste of life. The figures for that State for the years 1922

and 1923 are given as follows:

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Total automobiles, 1923 1, 070, 636 Total automobiles, 1922 858, 743	Total fatalities, 1923
Increase in number of automobiles 211, 893	Increase in fatalities 245
Percentage increase in automobiles Percentage increase in fatalities	

These figures show a percentage increase in automobile fatalities in 1923 over 1922 considerably larger than the percentage increase in the number of automobiles.

The Ohio Health News of March 28, 1924, published by the Ohio Public Health Association, contains the following statements:

"According to statistics compiled by the State bureau of vital statistics for 1923, Ohio's death rate due to automobile accidents was 17.6 per hundred thousand population as against a rate of 13.8 for 1922.

"There were 1,078 killed in automobile accidents in Ohio in 1923, as against 833 killed in 1922, an increase of 245. And this does not include 157 killed in automobile collisions with trains and interurban cars which are charged to railroad accidents.

"Higher mortality from automobile accidents has been a factor in

increasing the general death rate of Ohio during the past year.

"Voluntary health agencies are urged to cooperate with public authorities and civic bodies in safety campaigns and any other measures designed to curb this new menace. If a controllable disease were causing an increase in the death rate equal to the automobile death rate, quarantine would be resorted to and radical measures taken to safeguard human lives. This may not be a health function, but the health agency is at least justified in calling attention to the problem."

RESOLUTION ON LEGITIMATE NEEDS FOR OPIUM ADOPTED BY THE HEALTH COMMITTEE OF THE LEAGUE OF NATIONS.

The following is taken from a recent report of the first session of the new Health Committee of the League of Nations, held at Geneva in February, 1924, and relates to the "legitimate" needs of the various countries with respect to opium and its derivatives. The report was adopted by the Council of the League of Nations.

"The Committee has considered the report presented by the Mixed Subcommittee, composed of two members of the Advisory Committee on Opium and two members of the Provisional Health Committee. This report deals with the question of the legitimate needs of various countries in respect of opium and its derivatives; it is drawn up on the basis of the replies submitted by the Governments and the special enquiries undertaken by the Health Committee.

"The Committee has adopted the following resolution:

'The Health Committee having taken note of a report on the work of the Mixed Subcommittee on Opium and of the enquiries which it has set on foot with a view to determining the legitimate requirements of the various countries of opium and opium derivatives, it being understood that legitimate requirements are to be taken as meaning medical and scientific requirements alone;

'Notes that it is impossible, with the data now available, to determine accurately any figure representing legitimate requirements;

'Considers that, in fact, the estimate of 600 mgrs. of raw opium per head per annum adopted by the Mixed Subcommittee considerably exceeds the quantities necessary for those requirements,

And considers that this estimate ought to be reduced to 450 mgrs., it being understood that this figure represents a maximum and that, as it has been established solely on the basis of the estimate given by countries which have a highly developed system of medical aid, it can only be applied to countries in which similar conditions exist.

'The Committee further considers that since this figure is required essentially in order to arrive at a reduction in the world production of opium and the manufacture of its derivatives, it should be regarded exclusively from this point of view and not as a guide to the legitimate consumption of any given country.'

"The Committee decides to refer to a later session the consideration of the remaining conclusions of the Opium Mixed Subcommittee (as to cocaine, heroin, etc.)."

"HEALERS" OF TUBERCULOSIS.

"For some time past, tuberculosis victims or suspects have been exploited by so-called 'healers' (becoming every day more numerous), who offer alleged remedies, vaccines or serums, the mode of preparing which is kept secret," writes the Paris correspondent of the Journal of the American Medical Association. Owing to the advertisement of Gabrilovitch tuberculin, offered as "the truly curative and truly specific remedy," and to discussion in the press concerning the Spahlinger treatment, two leading French tuberculosis associations have published a protest stating that there does not exist at present any remedy, chemical or biologic, or any serum or vaccine, whose effectiveness in the treatment of tuberculosis has been demonstrated. They caution patients against the dangers to which they expose themselves by wasting money and losing precious time in trying therapeutic agents that are useless and often actually harmful. (-Reprinted from the Baltimore Health News for April, 1924, published by the Baltimore City Health Department.)

DEATHS DURING WEEK ENDED MARCH 29, 1924.

Summary of information received by telegraph from industrial insurance companies for week ended March 29, 1924, and corresponding week of 1923. (From the Weekly Health Index, April 1, 1924, issued by the Bureau of the Census, Department of Commerce.)

	Week ended March 29, 1924.	Corresponding week, 1923.
Policies in force	56, 792, 140	52, 684, 286
Number of death claims	11, 996	11, 462
Death claims per 1,600 policies in force, annual rate.	11. 0	11. 3

Deaths from all causes in certain large cities of the United States during the week ended March 29, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, April 1, 1924, issued by the Bureau of the Census, Department of Commerce.)

		ended 29, 1924.	Annual death rate per	Death 1 3	Infant mor- tality	
City.	Total deaths.	Death rute.1	1,000, corre- sponding week, 1923.	Week euded Mar. 29, 1924.	Care- sponding week, 1923.	rate, week ended Mar. 29, 1924.1
Total (64 cities)	7, 710	14.9	3 14. 4	992	3 893	
Akron	33			10	4	105
Albany 4	43	18.9	17. 3	3	2	66
Atlanta	89	20. 4	13. 8	11	5	
Baltimore 4	274	18.2	15. 2	28	29	81
Birmingham	63	16, 4	17.3	7	9	
Boston	231	15.5	18.7	32	32	89
Bridgeport	40			4	5	63
Buffalo	140	13. 4	14.1	33	21	140
Cambridge	26	12.1	13.6	3	1	52
Camden	42	17.3	13. 4	4	4	63
Canton	18	9.1	6.8	4	3	84

Annual rate per 1,000 population.
 Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1923. Cities left blank are not in the registration area for births.
 Data for 64 cities

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Deaths for week ended Friday, Mar. 28, 1924.

Deaths from all causes in certain large cities of the United States during the week ended March 29, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, April 1, 1924, issued by the Bureau of the Census, Department of Commerce)—Continued.

		ended 9, 1924.	Annual death rate per	Death under 1 year.		Infant mor- tality
City,	Total deaths.	Death rate.	rate per 1,000, corre- sponding week, 1923.	Week ended Mar. 29, 1924.	Corresponding week, 1923.	rate, week ended Mar. 29, 1924.
Chicago 4	749	13. 3	13. 6	99	101	9
Cincinnati	139	17.8	17. 2	18	19	113
Cleveland	227	13.0	10.6	31	21	8
Columbus	89 55	17. 4 15. 3	18. 2 12. 9	5 12	8	4
Dallas Dayton	40	12.3	10.7	8	4	13
Denver.	88		100.7	12	11	40
Denver Des Moines	39	14.0	13.7	. 5	6	
Detroit	281			70	38	130
Duluth	28 28	13. 5	11. 8	3 4	2	6
Erie	28 27	11.6	19, 4	8	3	8:
Fall River 4Flint.	23	11.0	10. 1	5	3 7 3	11:
Fort Worth	23	8.1	12.3	2	3	
Grand Rapids	36	12.7	12.5	6	3 7	90
Houston	40			6	7	
Indianapolis	112	16.7	16.6	18	9	130
Jacksonville, Fla	41 85	20. 9 14. 2	15, 1 13, 8	3	13	109
Jersey City Kansas City, Mo	104	15. 1	13. 2	22	5	10
Los Angeles	232			28	22	8
Louisville	80	16.1	16.8	10	11.	96
Lowell	31	14.0	15.0	6	4	107
lynn	70	11.1	13. 2 24. 5	1	3	2
Memphis Milwaukee	96	21. 2 10. 2	14. 1	10	4 27	56
Minneapolis	96	12.0	13.6	12	13	64
Nashville 4	43	18. 2	23, 8	4	8	
Nashville 4 New Bedford	33	13. 0	14.4	6	11	94
New Haven	51	15, 1	12.4	11	5	144
New Orleans	191 1, 699	24. 3 14. 7	16. 8 13. 2	24 231	15	93
New York Bronx Borough	207	12.4	11. 1	19	7	67
Brooklyn Borough	582	13.8	12.0	81	72	87
Manhattan Borough	742	17.1	15, 4	115	92	112
Queens Borough	122	11.5	11.0	12	13	06
Richmond Borough	46 121	18. 4 14. 2	16. 8 11. 9	19	6 9	73 89
Newark, N. J	42	13.3	11.5	2	2	36
Dakland	53	11, 2	10.9	6	2 2	75
Oakland Oklahoma City	26	13.0		2		
mana	68	17.0	15.6	4	9	43
Paterson	33 599	12. 2 16. 0	13. 1 18. 0	4	82	63
Philadelphia Pittsburgh	266	22. 2	14.5	58 52	24	74 176
Portland, Oreg	72	13. 5	16, 2	7	8	72
Providence	70	15. 0	17.9	10	10	81
lichmond	53	15.0	13. 5	5	5	59
lochester	87	13. 9	10.8	19	12 18	63
t. Louis	256 61	16. 4 13. 0	13. 2 14. 9	5	15	43
alt Lake City •	36	14.6	18.6	3	7 5	50
an Antonio	58	15, 8	15.0	1	6	
an Francisco	127	12.1	15. 0	5	7	30
chenectady	26	13. 5	13.7	5 7 5	3	199
omerville	18 27	9.3	14. 2	3	0 8	136
pringfield, Mass	47	16. 5	16, 6	9	3 5 7 4	152
yracuse	53	14.7	12.4	6	4	74
acoma	23	11.6	9. 2		1 .	
'oledo	80	15. 1	13. 0	13	10	123
Trenton	37	14. 9 16. 8	19. 2 17. 6	6 3	8	98
Vashington, D. C	126	13. 5	17. 6	10	16	65 58
Vaterbury	20	-5.0		4		89
VaterburyVilmington, Del	30	13.0	15, 5	3	2 5 5 7	65 175
onkers	30	14.3	12.6	8	5	175
oungstown	46	15. 5	12.5	6 1	7 1	87

Deaths for week ended Friday, Mar. 28, 1924.

PREVALENCE OF DISEASE.

th

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring.

UNITED STATES.

CURRENT STATE SUMMARIES.

These reports are preliminary, and the figures are subject to change when later returns are received by * the State health officers.

Reports for Week Ended April 5, 1924.

ALABAMA.		ARKANSAS - continued.	
	ases.		Cases.
Chicken pox	90	Scarlet fever	. 5
Diphtheria	6	Smallpox	. 14
Influenza	62	Trachoma	. 1
Malaria	12	Tuberculosis	. 13
Measles	497	Typhoid fever	6
Mumps	96	Whooping cough	37
Pellagra	3		
Pneumonia	119	CALIFORNIA	
Scarlet fever	6	Cerebrospinal meningitis-San Francisco	4
Smallpox	64	Diphtheria	207
Tuberculosis	35	Influenza	
Typhoid fever	8	Lethargic encephalitis:	
Whooping cough	45	Berkeley	1
		Oakland	1
Chi-k Car		San Francisco.:	1
Chicken pox	4 7	Sonoma County	1
Diphtheria		Measles	1, 106
Influenza	5	Scarlet fever	239
Measles	150	Smallpox:	
Mumps	8	Long Beach	10
Pneumonia	3	Los Angeles	127
Scarlet fever	14	Los Angeles County	43
Smallpox	2	National City	8
Trachoma	63	Scattering	57
Tuberculosis.	13	Typhoid fever:	
Whooping cough	2	Santa Ana	59
ARKANSAS.		Orange County	10
Chicken pox	35	Scattering	11
Diphtheria	2	Typhus fever-Los Angeles	1
Hookworm disease	1		-
Influenza.	102	COLORADO.	
Malaria	33	(Exclusive of Denver.)	
Measles	434		**
Mumps	30	Chicken pox	19
Paratyphoid fever	2	Diphtheria	24
	2	Influenza	3
Pellagra	2	Measles	246

COLORADO—continued.	ases.	GEORGIA—continued.	Cases.
	41	Malaria	31
Mumps	12		
Pneumonia	26	Measles	106
Scarlet fever		Mumps	32
Smallpox	2	Pneumonia	46
Trachoma	2	Scarlet fever	11
Tuberculosis.	53	Septic sore throat	6
Typhoid fever	2	Smallpox	167
Whooping cough	29	Tuberculosis (all forms)	18
		Typhoid fever	2
CONNECTICUT.		Whooping cough	29
		oping codga	20
Ccrebrospinal meningitis	1	ILLINOIS.	
Chicken pox	50		
Conjunctivitis (infectious)	2	Cerebrospinal meningitis-Will County	
Diphtheria	38	Diphtheria:	
German measles	9	Cook County	81
Influenza	17	Scattering	45
	154	Influenza	34
Measles	170	Lethargic encephalitis-Cook County	3
Mumps		Measles	707
Pneumenia (lobar)	54		
Poliomyelitis	1	Pneumonia.	401
Scarlet fever	156	Scarlet fever:	
Septic sore throat	1	Cook County	130
Smallpox	5	De Kalb County	9
Trichinosis	2	Kane County	26
Tuberculosis (all forms)	22	Macon County	11
	29	Scattering.	91
Whooping cough	20	Smallpox:	
DELAWARE.		Chicago	9
Chicken new	2		9
Chicken pox	2	Scattering	
Diphtheria	-	Tuberculosis	275
Influenza	5	Typhoid fever	10
Measles	5	Wheoping cough	118
Mumps	4		
Pneumonia	3	INDIANA.	
Scarlet fever	9	Chicken nor	100
Tuberculosis	6	Chicken pox	126
Whooping cough	5	Diphtheria:	
		Allen County	10
DISTRICT OF COLUMBIA.		Marion County	15
Chicken pox	55	Scattering	53
Diphtheria	14	Influenza	57
	1	Measles	1,007
Influenza		Pneumonia	42
Lethargic encephalitis	1	Scarlet fever:	
Measles	23	Elkhart County	14
Scarlet fever	49		26
Smallpox	19	Lake County	
The state of the s		Marion County	12
Tuberculosis	20		
	20	Montgomery County	20
Typhoid fever	2	Montgomery County St. Joseph County	20 31
		Montgomery County	
Typhoid fever	2	Montgomery County St. Joseph County	31
Typhoid fever	2	Montgomery County St. Joseph County Scattering Smallpox:	31
Typhoid fever	2 14	Montgomery County St. Joseph County Scattering Smallpox: Delaware County	31 65
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza.	2 14 9 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County	31 65 35 8
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza. Malaria.	2 14 9 5 13	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County	31 65 35 8 57
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza. Malaria. Pneumonia.	2 14 9 5 13 5	Montgomery County St. Joseph County Seattering Smallpox: Delaware County Fayette County Marion County Scattering	31 65 35 8 57 56
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia Scarlet fever	2 14 9 5 13 5 8	Montgomery County St. Joseph County Seattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis	31 65 35 8 57
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza Malaria Pneumonia Scarlet fever Smallpox	2 14 9 5 13 5 8 10	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever:	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia Scarlet fever	2 14 9 5 13 5 8	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia. Scarlet fever. Smallpox Typhoid fever.	2 14 9 5 13 5 8 10	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever:	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza Malaria Pneumonia Scarlet fever Smallpox Typhoid fever GEORGIA.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza Malaria Pneumonia Scarlet fever Smallpox Typhoid fever GEORGIA. Chicken pox.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza. Malaria. Pneumonia. Scarlet fever. Smallpox. Typhoid fever. GEORGIA. Chicken pox. Dengue.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delsware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering	31 65 35 8 57 56 45
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia. Scarlet fever. Smallpox. Typhoid fever. GEORGIA. Chicken pox. Dengue. Diphtheria.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough	31 65 35 8 57 56 45 15 2 101
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia. Scarlet fever. Smallpox Typhoid fever. GEORGIA. Chicken pox. Dengue. Diphtheria. Dysentery (bacillary).	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Seattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough	31 65 35 8 57 56 45 15 2 101
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza. Malaria. Pneumonia. Scariet fever. Smullpox Typhoid fever. GEORGIA. Chicken pox. Dengue. Diphtheria. Dysentery (bacillary). German measles.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough IOWA. Diphtheria Scarlet fever	31 65 35 8 57 56 45 15 2 101
Typhoid fever Whooping cough FLORIDA. Diphtheria Influenza. Malaria. Pneumonia. Scarlet fever. Smallpox Typhoid fever. GEORGIA. Chicken pox. Dengue. Diphtheria. Dysentery (bacillary).	2 14 9 5 13 5 8 10 5 1 25 1 9 4 11 37	Montgomery County St. Joseph County Seattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough 10WA. Diphtheria Scarlet fever Smallpox	31 65 35 8 57 56 45 15 2 101
Typhoid fever Whooping cough FLORIDA. Diphtheria. Influenza. Malaria. Pneumonia. Scariet fever. Smullpox Typhoid fever. GEORGIA. Chicken pox. Dengue. Diphtheria. Dysentery (bacillary). German measles.	2 14 9 5 13 5 8 10 5	Montgomery County St. Joseph County Scattering Smallpox: Delaware County Fayette County Marion County Scattering Tuberculosis Typhoid fever: Lake County Scattering Whooping cough IOWA. Diphtheria Scarlet fever	31 65 35 8 57 56 45 15 2 101

KANSAS.	ases.	MASSACHUSETTS.	Cases,
Cerebrospinal meningitis	2	Cerebrospinal meningitis	Curco
Chicken pox	110	Chicken pox	213
Diphtheria	38	Conjunctivitis (suppurative)	
German measles	1	Diphtheria	17
Influenza	7	German measles	8
Lethargic encephalitis	1	Influenza	14
Measles		Lethargic encephalitis	1
	369		999
Mumps	32	Measles.	
Pneumonia.	78	Mumps.	410
Scarlet fever		Ophthalmia neonatorum	21
Smallpox	49	Pneumonia (lobar)	153
Tuberculosis	55	Scarlet fever	463
Typhoid fever	9	Septie sore throat	12
Whooping cough	67	Tetanus	2
		Traehoma	2
LOUISIANA.		Trichinosis	1
Diphtheria	20	Tuberculosis (all forms)	137
Hookworm disease	58	Typhoid fever	6
Influenza	14	Whooping cough	111
Leprosy	1	***************************************	
Malaria	15	Michigan.	140
Measles	238	Diphtheria	
Pneumonia	64	Measles.	1078
Scarlet fever	8	Pneumonia	223
Smallpox	20	Scarlet fever	412
Tuberculosis	23	Smallpox	154
Typhoid fever	31	Tuberculosis	236
		Typhoid fever	11
Whooping cough	6	Whooping cough	109
MAINE.		MINNESOTA.	
		Chicken pox	85
Cerebrospinal meningitis	1	Diphtheria	53
Chicken pox	26	Influenza	1
Diphtheria	13	Measles	229
German measles	17	Pneumonia	
Measles	169		10
Mumps	46	Scarlet fever	213
Pneumonia	8	Smallpox	50
Scarlet fever	33	Tuberculosis	144
Tuberculosis	7	Typhoid fever	4
Typhoid fever	1	Whooping cough	10
Vincent's angina		MISSISSIPPI.	
	1	Diphtheria	9
Whooping cough	24	Scarlet fever	7
MARYLAND,1		Smallpox	10
Beco. 40 6 50(1 67 67)		Typhoid fever	9
Cerebrospinal meningitis	1		9
Chicken pox	127	MISSOURI.	
Diphtheria	31	Carebreuninal maningiti-	
German measles	85	Cerebrospinal meningitis	2
Influenza.	64	Chicken pox.	33
		Diphtheria	38
Malaria	3	Influenza	23
Measles	318	Measles	463
Mumps	39	Mumps	164
Pneumonia (all forms)	127	Pneumonia	21
Scarlet fever	129	Rabies	1
Septic sore throat	2	Scarlet fever	134
Smallpox	4	Smallpox	18
Tuberculosis	63	Trachoma	1
Typhoid fever	2	Tuberculosis	35
Vincent's angina	2	Typhoid fever	3
	50	Typhoid fever Whooping cough	3 75

·Deaths.

MONTANA		OREGON.	ases.
(ases.		
Diphtheria	11	Chicken pox	23
Scarlet fever	30	Diphtheria:	
Smallpox	27	Portland	15
Typhoid fever	1	Scattering	10
		Lafluenza	9
NEBRASKA.		Measles	186
Chicken pox	16	Mumps	8
Diphtheria	8		15
Influenza	2	Pneumonia	- 0
Measles	316	Scarlet fever:	_
	1	Portland	8
Mumps		Seattering	8
Pneumonia	2	Smallpox:	
Scarlet fever	21	Portland	10
Smallpox	13	Scattering	4
Tuberculosis	3	Tuberculosis	7
		Typhoid fever	4
NEW JERSEY.			3
Cerebrospinal meningitis	3	Whooping cough	3
	233	SOUTH DAKOTA.	
Chicken pox			
Diphtheria	113	Chicken pox	12
Influenza	28	Diphtheria	14
Malaria	2	Measles	201
Measles	654	Pneumonia	7
Pneumonia	221	Scarlet fever	52
Scarlet fever	203	Smallpox	3
Trachoma	1		6
	3	Tuberculosis	
Typhoid fever		Typhoid fever	1
Whooping cough	109	Whooping cough	6
NEW MEXICO.		TEXAS.	
ALC: MARKET			
Cerebrospinal meningitis	1	Chicken pox	101
Chicken pox	21	Diphtheria	45
Conjunctivitis	1	Influenza	90
Diphtheria	10	Lethargic encephalitis	2
Measles	293	Measles	498
	5	Mumps	132
Mumps		Ophthalmia neonatorum	6
Pneumonia	11		1
Scarlet fever	6	Pellagra	
Tuberculosis	20	Pneumonia	57
Whooping cough	2	Scarlet fever	15
NEW YORK		Smallpox	75
		Trachoma	13
(Exclusive of New York City and Rocheste	Pr.)	Tuberculosis	92
Cerebrospinal meningitis	2	Typhoid fever	2
Diphtheria	102	Whooping cough	41
Influenza.	43	THE HOUSE COMES	2.5
	1	VERMONT.	
Lethargic encephalitis		Chicken pox	24
Measles			1
Pneumonia	331	Diphtheria	
Poliomyelitis	1	Measles	139
Scarlet fever	439	Mumps	6
Smallpox	4	Scarlet fever	13
Typhoid fever	20	Whooping cough	28
Whooping cough	341		
	0	WASHINGTON.	
NORTH CAROLINA.		Chicken pox	67
Cerebrospinal meningitis	2	Diphtheria	28
Chicken pox	201	Measles	156
Diphtheria	18	Mumps	18
German measles			2
	1	Pneumonia	-
Measles		Scarlet fever:	
Scarlet fever	40	Spokane	18
Septic sore throat	6	Scattering	17
Smallpox	169	Smallpox:	
Typhoid fever	6	Spokane	26
Whooping cough	410	Scattering	23
75 -1			

WASHINGTON—continued.	ases.	Scattering: Wisconsin—continued.	ases.
Tuberculosis	78		
	2	Chicken pox	117
Typhoid fever		Diphtheria	38
Whooping cough	8	German measles	29
WEST VIRGINIA.		Influenza	37
		Lethargic encephalitis	1
Cerebrospinal meningitis—Charleston	1	Measles	373
Diphtheria	6	Ophthalmia neonatorum	1
Scarlet fever	8	Pneumonia	36
Smallpox	1	Scarlet fever	224
Typhoid fever	4	Smallpox	32
WIS ONSIN.		Tuberculosis	26
Milwaukee:		Typhoid fever	5
Cerebrospinal meningitis	1	Whooping cough	119
Chicken pox	61		
Diphtheria	15	WYOMING.	
German measles	1		
Measles	41	Chicken pox	15
Ophthalmia neonatorum	2	Diphtheria	1
Pneumonia	10	Lethargic encephalitis	1
Scarlet fever	22	Measles	114
Smallpox	1	Mumps	23
Tuberculosis	22	Pneumonia	8
Typhoid fever	1	Scarlet fever	5
Whooping cough	30	Whooping cough	7

Report for week ended March 29, 1924.

NORTH DAKOTA.		NORTH DAKOTA-continued.	
C	ases.	Ca	1808.
Chicken pox	23	Pneumonia	21
Diphtheria	18	Scarlet fever	48
German measles	11	Smallpox	5
Measles	234	Tuberculosis	2
Mumps	10	Whooping cough	8

SUMMARY OF CASES REPORTED MONTHLY BY STATES.

2 2 11

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week:

State.	Cere- bro- spinal menin- gitis.	Diph- theria.	Influ- enza.	Ma- laria.	Measles	Pella- gra.	Polio- mye- litis.	Scarlet fever.	Small- pox.	Ty- phoid fever.
February, 1924. Colorado Hawaii North Carolina Ohio Pennsylvania Virginia March, 1924.	12 1 4 10 5	128 28 157 723 1, 449 219	9 147 78 4, 283	0 0 75	2, 340 10 8, 098 1, 122 2, 981 3, 235	0 0 11	2 1 5	228 1 185 1, 751 2, 298 213	6 686 514 11 33	17 12 9 47 127
Connecticut District of Columbia	7	196 31	49 16		782 59	0	2	806 169	29 40	13 7

SMALLPOX IN DETROIT, MICH.

The following table gives a summary of the number of cases of smallpox reported in Detroit, Mich., from September 1, 1923, to March 15, 1924:

	Cases.	Deaths.
September, 1923. October, 1923. November, 1923. December, 1923. January, 1924. February, 1924. Mar. i to 15, 1924.	11 20 51 82 139 267 140	1 2 1
Total	710	4

The average number of cases reported in Detroit for the past five years was as follows:

December	52
January	53
February	58
March (entire month)	79

The January death was a case complicated with pneumonia. The February deaths were hemorrhagic cases, one of which was a member of the same family in which so many cases and deaths occurred in Windsor, Ontario. The other February death was a paralytic woman who had not been out of her house for about a year. The source of infection was not established. The patient dying in March was the husband of the Windsor infection case dying in February.

The situation in Windsor, Ontario, is briefly summarized as follows: From the beginning of the outbreak in Windsor, about December 12, until March 15, there were 67 cases of smallpox in Windsor and vicinity. Of these 67 cases, 22 resulted in death. All of the deaths occurred in unvaccinated persons.

Vaccination campaigns have been conducted in Windsor and adjacent municipalities. From February 27 to March 17 officers of the Public Health Service operated free vaccination stations at the wharves.

MORBIDITY REPORTS FROM CITIES.

Reports of the prevalence of communicable diseases in 105 cities, having an aggregate population of nearly 29,000,000, for the week ended March 22, 1924, show little change from the preceding week. Five hundred and sixty-five cases of smallpox were reported for the week by these cities, more than half of these cases being reported from four cities—Indianapolis, Atlanta, Detroit, and Los Angeles. The estimated expectancy for the 105 cities, based on reports for

the last nine years, was only 193 cases. During the corresponding week of last year these cities reported only 100 cases.

The reports for the week indicate that diphtheria was slightly more prevalent in the cities than it was during the corresponding week of last year.

The number of cases of scarlet fever reported for the week was more than 16 per cent higher than the number reported for the corresponding week of last year and 78 per cent higher than the estimated expectancy.

Deaths, all causes.—The Bulletin of the Metropolitan Life Insurance Co. for the week ended March 15, 1924, says:

"That the public health situation of 1924, to date, is without precedent becomes more and more evident each week. * * *

"Decreases [from the corresponding period of 1923] have been recorded for all of the diseases of numerical importance. The greatest drops in the death rate have been those for organic heart disease, pneumonia, and influenza, but very considerable decreases have been recorded for tuberculosis, cerebral hemorrhage, and chronic nephritis. Even the cancer rate, so far this year, shows improvement. A favorable record is in evidence, also, for the diseases of chief public health interest, namely, typhoid fever, measles, diphtheria, and puerperal causes. There has been a slight rise in the scarlet fever rate.

"In the field of violent deaths slight declines are in evidence for suicides and homicides. The cumulative death rate for accidents still exceeds that recorded at this time in 1923, but the excess is small, and the mortality in recent weeks has been much more favorable than in January and February. The rate for automobile fatalities is now 10.4 per 100,000, which is 8.3 per cent in excess of that for the same weeks of 1923."

City reports for week ended March 22, 1924.

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics, or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimated expectancy is the mean number of cases reported for the week during non-epidemic years.

epidemic years.

If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1915 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

		Diph	theria.	Influ	enza.			D	Scarle	t fever.
Division, State, and city.	Chick- en pox, cases re- ported.	Cases, esti- mated expect- ancy.	Cases re- ported.	Cases re- ported.	Deaths re- ported.	Mea- sles, cases re- ported.	Mumps, cases re- ported.	Pneu- monia, deaths re- ported.	Cases, esti- mated expect- ancy.	Cases re- ported.
New England: Maine-										
Portland New Hamp-	10	2	3	0	0	1	30	5	3	0
shire— Concord	0	0	0	0	0	58	0	1	1	0
Manchester.	0	2	1	0	0	13	0	3	2	2
Vermont-	1	0	0	0	0	3	0	0	1	0
Burlington.	1	i	0	0	0	i	0	2	0	2
Massachusetts-							-			
Boston	49	63	78	4 2	1 2	197	29	21	58	115
Fall River Springfield.	6 5	4	3	1	1	90	5	2	6	27
Worcester		5	18	3	0	8		5	8	28
Rhode Island-										
Pawtucket.		1	3	0	0	1		0	1	2
Providence.	0	11	6	0	0	0	0	10	8	66
Connecticut-	0	7	6	0	0	1	0	0	5	9
Bridgeport. Hartford	0	8	9	0	0	46		7	6	62
New Haven.	8	2	2		1	7	67	10	4	12
Middle Atlantic:										
New York-	0	14	8		1	33	0	16	18	19
Buffalo New York	270	281	205	83	12	2,091	259	242	202	307
Rochester	3	9	0	0	0	7	8	12	12	22
Syracuse	38	7	8	0	0	43	8	1	17	42
New Jersey -								_		-
Camden		3	13	0	0	0	140	7	2 26	3 20
Newark	55	21	15	15	0	86 33	142	8	4	3
Trenton Pennsylvania—	2	5	10	0	U	30	0	9		9
Philadel-										
phia	126	73	117	2	8 7	139	0	89	61	76
Pittsburgh.	63	21	34			31	130	117	20	36
Reading	0	3	5	0	0	13	0	0 3	3	5
Scranton East North Central:	15	3	2		1	19	0	0	,	a
Ohio-										
Cincinnati.	12	13	12	1	1	134	25	9	11	11
Cleveland	115	27	24	6	2	51	295	35	34	17
Columbus	5	4	4	0	0	2	0 2	5	8 12	14 13
Toledo	53	4	10		1	38	-	9	12	13
FortWayne		3	2	0	0	12		1	2	6
Indianapo-			-							
lis		10	2		1	72		14	14	5
South Bend		1	6	0	0	1		1	3	10
Terre Haute	2	1	0	0	0	6	0	2	4	1
Illinois-	-			0	0			-		•
Chicago	164	97	98	33	6	136	146	89	121	139
Cicero	7	2	6	0	0	0	36	0	3	2
Springfield.	11	1	2	1	1	3	0	1	2	0
Michigan-	74	01	55	2	0	187	105	41	71	94
Detroit	74	61 5	3	2	1	27	36	3	8	9
Grand Rap-	15	2	2		i	i	47	2	9	17
ids		- 1	1							
Saginaw	0 1	1	0	0	0	13	3 1	4 1	2	47

		Diph	theria.	Influ	ienza.				Scarle	t fever.
Division, State, and city.	Chick- en pox, cases re- ported.	Cases, esti- mated expect- ancy.	Cases re- ported.	Cases re- ported.	Deaths re- ported.	Mea- sles, cases re- ported.	Mumps, cases re- ported.	Pneu- monia, deaths re- ported.	Cases, esti- mated expect- ancy.	Cases re- ported.
East North Cen- tral—Continued.										
Wisconsin-										
Madison Milwaukee.	13	14	14	0	0	1 26	1 13	0	33	2
Racine	15	1	i	0	0	0	0	2	5	18
Superior		1	0	0	0	0		2	2	4
West North Cen- tral:										
Minnesota-										
Duluth		1	0	0	0	1		1	5	12
Minneapo-	-		40			44	0		000	76
St. Paul	72	15 13	13 21	0	0	41 37	8	5 7	27	67
Iowa-	*******	40					********		-	
Davenport.		1	1	0		0			3	1
Des Moines	0	3	1	0		1	0	******	9 3	
Sioux City_ Waterloo	1	0	1	0	*******	4	26	*******	4	3
Missouri-	-					-	-			
Kansas						***	00	0.4		
City	16	9	5	2	2	100	20	24	9 3	17
St. Joseph St. Louis	30	50	32	1	0	64	46		28	90
North Dakota-										
Fargo	0	2	0	0	0	0	0	2	3	0
Grand Forks	0	1	0	0		31	0		1	0
South Dakota-	-	*								
Sioux Falls		0	0	0	0	2		0	3	1
Nebraska- Lincoln	0	2	5	0	0	30	0	1	4	. 9
Omaha	6	4	3	0	0	128	0	5	10	0
Kansas—				0		000	1		0	0
Topeka Wichita	13	1	6	0	0	339 171	154	3 5	2 2	7
South Atlantic:						***	101		-	
Delaware—										
Wilmington		2	5	0	0	2		4	3	8
Maryland— Baltimore	163	24	28	26	6	225	27	39	34	108
Frederick		1	0	0	0	16		0	0	10
Dist. of Col.— Washington	pem			9	2	10	0	28	20	41
Virginia—	77	11	8	3	2	18	0	20	20	41
Lynchburg.	1	1	0	0	0	2	2	0	0	1
Noriolk	21	1	0	0	0	72	6	7 6	2 2	2
Richmond Roanoke	10	2	3		1 2	38	2	2	1	4
West Virginia-		- 1	-			^				
Charleston.	8	1	2	0	0	1	0	4	1	0
Huntington	1	1 2	0		1 2	3	2	4	1	0
Wheeling North Caro-		- 1		*******	-	9	-	3		•
lina—										
Raleigh	20	0	0	0	0	9	0	2	0	0
Wilmington Winston-	6	0	0	0	0	77	14	1	1	0
Salem	1	0	0	0	0	50	7	7	1	20
South Caro-										
lina— Charleston	1	0	2	0	1	3	5	7	0	0
Columbia.	11	1	ő	0	o l	32	19	4	0	0
Greenville	1	0	0	0	0	60	5	2	0	3
Georgia-	0	2	6	10	0	14	10	24	4	9
Atlanta Brunswick	0	0	0	0	0	30	10	2	1	0
Savannah	6	0	2	1	1	14	0	7	1	2
Florida—								-		
St. Peters- burg	3		1	0	0	2	0	1		7
Tampa	2	3	0	0 1	0	6	0	0 1	0	7

		Diph	theria.	Influ	enza.				Scarlet fever.		
Division, State, and city.	Chick- en pox, cuses re- ported.	Cases, esti- mated expect- ancy	Cases re- ported.	Cases re- ported.	Deaths re- ported.	Mea- sles, cases re- ported.	Mumps, cases re- ported.	Pneu- monia, deaths re- ported.	Cases, esti- mated expect- ancy.	Cases re- ported.	
East South Central:											
Kentucky-	0			0	0	4	0	2			
Covington . Lexington	1	1 0	1 0	0	0	55	0	2	2		
Louisville	4	7	4	0	0	6	9	17	4		
Tennessee-											
Memphis	33	6	9		1	32	49	13	4	:	
Nashville	6	1	2		3	16	0	9	1	1	
Alabama —							1	1			
Birming- ham	29	2	1	9	4	151	48	21	1		
Mobile	0	ī	i ô		i	15	0	2	Ô		
Montgom-											
West South Cen- tral:		1	0	2	0	7	*******	5	0	(
Arkansas -											
Fort Smith.	5	1	1	0		154	3		1	9	
Little Rock Louisiana—	1		. 1	0		46	10		1	1	
New Or-											
leans	3	9	14	8	7	164	0	15	3		
Shreveport.	0		1	0	0	6	1	2		(
Oklahoma—	2										
Tulsa Texas—	2	1	1	0		11	0	******	0	1	
Dallas	4	3	1		1	49	12	8	1	1	
Galveston	0	0	0	0	0	7	0	2	0	1	
Houston	0	2	0	0	0	54	0	12	1	1	
San An-	2	2	3	0	0	34	0	17	1		
Mountain:	- 1		3			31	0	41		,	
Montana-											
Billings	1	1	0	0	0	3	0	0	1	(
Great Falls.	4	1	4	0	0	26	0	0	0	4	
Helena Missoula	0	1	0	0	0	28 33	0	9	1	0	
Idaho-	0			0		33	0	U	1		
Boise		0	0	0	0	124		0	1	(
Colorado-											
Denver	31	8	18		1	125	4	13	9	14	
Pueblo New Mexico-	8	2	2	0	0	39	13	3	1	3	
Albuquer-	- 1	- 1									
que	2	0	2	0	0	40	0	3	3		
Utah—											
Salt Lake	10					040	10				
Nevada-	18	3	0		1	240	12	4	3	0	
Reno	3	0	0	0	0	16	0	0	0	0	
Pacific:									-		
Washington-	- 1			- 1	1						
Seattle Spokane	39	4 2	12	0		55 12	2		9 5	10 11	
Tacoma	9	î	8	0		30	9		3	6	
Oregon-	-	1				50			9		
Portland	8	3	16	0	0	12	3	5	6	5	
California—											
Los An-		23	er			302		10	14	***	
Sacramento	*****	1	65	5	0 2	302		18	14	71	
San Fran-		-		*****	-	0		0	-	U	
cisco	47	22	38	4	0	92	13	13	16	42	

		Si	mallpo	x.	deaths	Тур	hoid fe	cases		
Division, State, and city.	Popula- tion July 1, 1923, estimated.	Cases, estimated expectancy.	Cases reported.	Deaths reported.	Tuberculosis, de	Cases, estimated expectancy.	Cases reported.	Deaths reported.	Whooping cough reported.	Deaths, all causes.
New England: Maine—										
Lewiston	33, 790 73, 129	0	0	0	0 2	0	0	0	0 4	16 24
Concord Manchester	22, 408 81, 383	0	0	0	0	0	0	0	1 0	18
Vermont— Barre Burlington	1 10, 008 23, 613	0	0	0	2 0	0	0	0	1 0	7 10
Massachusetts— Boston Fall River	770, 400 120, 912	0	0	0	16 2	1	1 0	0	8	227 46
Springfield Worcester	144, 227 191, 927	0	0	0	3	0	0	0	2	35 49
Rhode Island— Pawtucket Providence	68, 799 242, 378	0	0	0	0 5	0	0	0	<u>i</u>	20 82
Connecticut— Bridgeport Hartford	1 143, 555	0	0	0	2	0	0	0	0	26 48
New Haven Middle Atlantic:	1 138, 036 172, 967	0	ő	0	3	0	0	0	1	49
New York— Buffalo New York	536, 718 5, 927, 625	0	0	0	11 120	1 7	2	1 2	33 138	136 1, 575
Rochester Syracuse New Jersey—	5, 927, 625 317, 867 184, 511	0	0	0	5 2	0	0	0	3 2	88 29
Camden Newark	124, 157 438, 699	0	0	0	1 8	0	1	1 0	18	30 110
Trenton Pennsylvania— Philadelphia	127, 390 1, 922, 788	0	0	0	3 44	4	3	0	60	565
Pittsburgh Reading	613, 442 110, 917	0 0	0	0	12	1 1 0	0 2	0 0	50 6 0	281 35
Scranton East North Central: Ohio—	140, 636		0		1					
Cleveland	406, 312 888, 519	2 2 1	11 1 2	0	15	2 0	3 0	0 2 0	34 29 4	128 205
Columbus Toledo Indiana—	261, 082 268, 338	5	19	0	. 7	0	0	0	33	82 68
Fort Wayne Indianapolis South Bend	93, 573 342, 718 76, 709	4	5 84 0	0	9 0	0 0	0	0		17 137 6
Terre Haute	68, 939 2, 886, 121	3	8	0	67	4	0	3	6 26	724
Cicero Springfield	2, 886, 121 55, 968 61, 833	0 2	0	0	0	0	0	0	0	4 15
Detroit Flint	995, 668 117, 968	3 0	60 2	0	17	3 0	0 3	0	19	272 25
Grand Rapids Saginaw Wisconsin—	117, 968 145, 947 69, 754	0	1	0	1	0	1	0	7	32 21
Madison	42, 519 484, 595 64, 393	5	0 1 3	0	8	0 1 0	0 0	0 0	55 0	5 94 12
Superior West North Central: Minnesota—	1 39, 671	2	9	0	0	0	0	0		16
Duluth Minneapolis St. Paul	106, 289 409, 125 241, 891	1 20 9	12 6 36	0 0	10	2 0	1 2 0	0 0	0	19 101 67

¹ Population Jan. 1, 1920.

0 0

0 2

0

0 0 0

10 11 6

42

Pulmonary only.

		2	mallpo	X.	deaths	Тур	ohoid i	lever.	cases	
Division, State, and city,	Population July 1, 1923, estimated.	Cases, estimated expectancy.	Cases reported.	Deaths reported.	Tuberculosis, de	Cases, estimated expectancy.	Cases reported.	Deaths reported.	8 8 6 2 28 0 0 0 14 28 7 7 1 0 0 1 1 0 0 2 0	Deaths, all causes.
West North Central-Continued Iowa-										
Davenport	61, 262	4	9			0	0			
Des Moines	140, 923	3	2			0	0		0	
Sioux City Waterloo	79,662	4 0				0				
Missouri-	39, 667		0			0	0		0	
Kansas City	351, 819 78, 232	8	0	0	6	1	0	0	6	123
St. Joseph	78, 232	5	0	0	1	0	0	0		25
St. Louis North Dakota—	803, 853	5	3	0	15	2	2	0	28	255
Fargo	24, 841	1	0	0	1	0	0	0	0	8
Grand Forks	14, 547	1	0			0	0			
South Dakota-	00.000						-			
Sioux Falls Nebraska—	29, 206	2	0	0	1	0	0	0		4
Lincoln	58, 761	2	0	0	0	0	0	0	0	17
Omaha	204, 382	9	1	0	4	0	0	0		55
Kansas—	52, 555	3	1	0	1	0	0			
Topeka Wiehita	79, 261	6	18	0	1	0	0	0		21 21
South Atlantic:	10, 102	-			-					
Delaware—			_			- 1				
Wilmington Maryland—	117, 728	0	0	0	3	0	0	0		28
Baltimore	773, 580	0	0	0	15	4	0	0	28	232
Frederick	11, 301	0	0	0	0	0	0	0		6
District of Columbia-	1.407 631		10		10				-	
Washington Virginia—	1 437, 571	1	10	0	13	1	1	0	7	160
Lynchburg	30, 277	0	0	0	1	0	0	0	19	11
Norfolk	159, 080	1	0	0	1	0	0	0	8	*****
Richmond	181, 044	0	1	0	4	1	0	0		52
Roanoke West Virginia—	55, 502	1	0	0	0	0	0	θ	2	13
Charleston	45, 597	0	3	0	4	0	0	0	0	19
Huntington	57, 918	0	0	0	2	0	0	0		20
Wheeling North Carolina—	1 56, 208	0	0	0	1	1	0	1	5	24
Raleigh	29, 171	0	12	0	3	0	0	0	7	10
Willinington	35, 719	0	0	0	0	0	0	0		6
Winston-Salem	56, 230	5	4	0	8	0	0	0	0	26
South Carolina— Charleston	71 045	0	1	0	3	0	0	0		0.00
Columbia	71, 245 39, 688	0	3	0	1	1	0	0		37 40
Greenville	25, 789	1	3	0	0	0	0	0		9
Georgia— Atlanta	000 000		0.		-	-				
Brunswick	222, 963 15, 937	4	85	0	5	0	0	1 0	0	106
Savannah	89, 148	1	1	0	5	0	0	0	1	43
F IOFICIA		1	1							
St. Petersburg Tampa	24, 408 56, 050	0	0	0	0 -		0	0		11
East South Central:	30, 030	0	0	U	2	3	0	0	1	16
Kentucky-			1					1		
Covington	57, 877	0	1	0	1	0	0	0		11
Lexington Louisville	43, 673 257, 671	0	0	0	2	0	0	0		20
Tennessee-	401, 011	1	0	0	8	0	3	0	0	90
Memphis	170, 067	2	0	0	3	0	2	0	3	54
Nashville	121, 128	1	0	0	5	1	1	0	0	58
Alabama— Birmingham	195, 901	1	24	0	3	1	7	0	2	-
Wioping	63, 858	2	0	0	3	0	0	0	7 0	79 26
Montgomery	45, 383	ő	0	0	0	0	0	0	0	14
West South Central:										
Arkansas Fort Smith	30, 635	0	0			0	0		7	
Little Rock	70, 916	2	0			0	0		2	

¹ Population Jan. 1, 1920.

			8	Smallp	ox.		deaths	Ту	phoid	fever.	cases	
Division, State, and city		Popula- tion July 1, 1923, estimated	Cases, estimated expectancy.	Cases reported.		Deaths reported.	Tuberculosis, de	Cases, estimated expectancy.	Cases reported.	Deaths reported.	Whooping cough, or	Deaths, all causes.
West South Central-Contin	ued.				1							
New Orleans Shreveport		404, 575 54, 590	6	0		0	12		0	0	1	
Oklahoma— Tulsa		102, 018		7				. 0	0	-		
Texas-	1		1									
Dallas		177, 274	7	0	1	0	5		0	0	1	
Galveston		46, 877 154, 970		0	1	0	3		0	0	0	
San Antonio		184, 727	0	0	1	0	11		1	0	1 2	
Mountain: Montana—					1							
Billings		16, 927	1	0		0	0		0	0	2	
Great Falls		27, 787 1 12, 037	1	0		0	0		0	0	8	
Missoula		1 12, 668	1	2	1	1	0		0	0	1	
Idaho—		22, 806	0	2		0	0	0	0	0		
Boise							U	0				-
Denver		272, 031	11	0		0	12		0	0	6	
Pueblo New Mexico—		43, 519	1	0	1	0	U	0	1	0	0	1
Albuquerque		16, 648	0	0		0	2	0	0	0	0	1
Utah— Salt Lake City		126, 241	9	0		0	3	0	0	0	5	41
Nevada—												1
Pacific:		12, 429	0	0		0	0	0	0	0	0	1
Washington-				_								
Seattle Spokane	*****	1 315, 685 104, 573	11	31			****	0	1 0		5 11	1
Tacoma		101, 731	2	1		-		0	0		0	
Oregon— Portland	1	273, 621	6	15		0	0	0	2	1	0	6
California—					ĺ	1		1				
Los Angeles		666, 853	2 0	110		0	37	3	7	1 0		26
Sacramento San Francisco	****	69, 950 539, 038	3	0		0	14	2	1	0	1	153
	Cereb	rospinal ingitis.	Letl	Lethargic encephalitis.		Pellagra.			Police	omyeli paral	tis (infantile ysis).	
Division, State, and city.				i			1			1	1	
	Cases.	Deaths.	Cases.	Deat	hs.	Cas	es.	Deaths.	Cases est. es pecta cy.	X- C.	ses. I	Deaths.
New England:												
Massachusetts-							0	-				
Boston	1	0	0		0		0	0		0	0	0
renode Island—												
Providence Connecticut—	0	0	0		1		0	0		0	0	0
Bridgeport Middle Atlantic:	0	0	0		1		0	0		0	0	0
New York— New York	1	2	12		5		0	6		1	0	0
Pennsylvania— Philadelphia	0	0	1		0		0	0		0	0	0
East North Central:	J											U
Cleveland	0	0	1		0		0	0		0	0	0
ColumbusIllinois—	0	0	0		1		0	0		0	0	0
Chicago	3	1	1		0		0	0		1	11	1

¹ Population Jan. 1, 1920.

City reports for week ended March 22, 1924-Continued.

		rospinal ngitis.		nargie halitis.	Pell	agra.	Poliomyelitis (infantile paralysis).			
Division, State, and city.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases, est. ex- pectan- cy.	Cases.	Deaths	
East North Central-Contd.										
Michigan-									-	
Detroit	1	0	0	0	0	0	0	0		
Saginaw West North Central:	0	ı	0	0	0	0	0	0	(
Minnesota—										
St. Paul	0	0	0	0	0	0	0	1		
Missouri—		0	0	0	0				,	
Kansas City	0	0	1	1	0	0	0	0		
St. Louis	3	1	0	0	0	0	0	0		
South Atlantie:										
Maryland-										
Baltimore	0	0	4	1	0	0	0	0	(
Distirct of Columbia—							0			
Washington Virginia—	0	0	1	1	0	0	0	0	,	
Lynchburg	0	0	0	0	0	0	0	1		
Norfolk	0	0	1	0	0	0	0	ô		
North Carolina-									1	
Raleigh	0	0	0	0	0	1	0	0	(
Winsten-Salem	0	0	0	0	1	1	0	0	(
South Carolina-										
Charleston	0	0	0	0	0	2	0	0	1	
Columbia E at South Central:	0	0	0	0	0	4	0	0	,	
Tennessee-										
Memphis	0	0	0	0	1	0	0	0	-	
Nashville	0	0	0	0	o o	1	0	0	(
Alabama—										
Birmingham	0	0	1	0	2	0	0	0	(
West South Central:										
Texas-	0			0	1	1	0	0		
Dallas	0	0	0	0	ô	i	0	0		
Mountain:	U				U	1	0	U	,	
Colorado—							1			
Denver	0	0	0	2	0	0	0	0	0	
Utah—										
Salt Lake City	0	0	0	1	0	0	0	0	0	
Pacifie:										
California— San Francisco	0	0	1	1	0	0	0	0	0	
can Francisco	0	0	1	1	U	0	0	0		

The following table gives a summary of the reports from 105 cities for the eight-week period ended March 22, 1924. The cities included in this table are those whose reports have been published for all eight weeks in the Public Health Reports. Eight of these cities did not report deaths. The aggregate population of the cities reporting cases was estimated at nearly 29,000,000 on July 1, 1923, which is the latest date for which estimates are available. The cities reporting deaths had more than 28,000,000 population on that date. The number of cities included in each group and the aggregate population are shown in a separate table below.

Summary of weekly reports from cities, January 27 to March 22, 1924.

DIPHTHERIA CASES.

			· m · m · m					
				1924, wee	k ended-			
	Feb. 2.	Feb. 9	Feb. 16.	Feb. 23.	Mar. 1.	Mar. 8.	Mar. 15.	Mar. 22.
Total	1, 288	1, 305	1, 226	1,075	1, 103	1, 024	1, 052	1, 115
New England Middle Atlantic East North Central	161 410 291	136 490 284	115 434 247	109 394 225	125 388 230	86 351 218	110 401 234	135 415 229
West North Central South Atlantic East South Central	125 59 19	97 80 13	128 57 17	102 31 13	2 86 54 11	1110 43 9	² 76 37 12	1 80 61
West South Central Mountain Pacific	38 21 164	33 21 181	37 23 168	34 27 140	34 19 156	34 24 149	18 24 2 140	21 22 124
		N	MEASLES	CASES,				
Total	5, 908	5, 794	6, 577	6, 002	7, 258	7, 101	7, 155	7, 024
New England Middle Atlantic East North Central	227 899 330	265 1, 004 292	334 1, 183 378	294 1, 388 322	469 1, 838 476	353 1, 971 541	460 2, 253 604	430 2, 467 659
West North Central South Atlantie East South Central	522 556 118	643 508 98	814 655 118	835 578 163	² 1, 056 683 263	2 1, 045 801 155	2 1, 112 579 196	1 923 675 231 514
West South Central Mountain Pacific	564 1,005 1,687	511 975 1, 498	710 1, 216 1, 169	738 871 813	781 879 813	693 819 723	739 3 797	634 491
'	'	SCAF	RLET FE	VER CAS	BES.			
Total	1,858	1, 934	1, 798	1, 677	1, 873	1, 928	1,921	1, 927
New England Middle Atlantic	368 492	307 572	276 525	301 450	330 519	388 532	413 520	337 532
East North Central West North Central South Atlantic	405 227 145	426 248 183	383 258 157	317 272 142	380 250 188	347 2 246 209	349 2 249 175	376 1 269 221
East South Central West South Central Mountain Pacific	12 19 24 166	18 19 27 134	14 12 41 132	12 8 24 151	12 9 30 155	28 11 25 142	22 19 27 3 147	17 13 22 140
I action	100		MALLPO					
		0.	MALLETO	A CASES			-	
Total	368	427	473	486	521	488	521	565
New England	0 3 74 36 58 5 12 2	0 0 87 59 118 8 6 4	0 0 143 49 117 5 12 3 144	0 101 65 117 9 14 2 178	0 0 145 2 51 121 35 4 11 154	0 160 2 56 117 35 2 11	0 2 125 2 76 144 25 5 3 3 141	0 0 186 1 77 123 25 6 4 144

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Figures for Sioux City, Iowa, estimated. Reports not received at time of going to press.
 Figures for Kansas City, Mo., estimated. Report not received at time of going to press.
 Figures for Seattle, Spokane, and Tacoma, Wash., estimated. Reports not received at time of going to press.

Summary of weekly reports from cities, January 27 to March 22, 1924—Contd.

TYPHOID FEVER CASES.

		1111	IOID FE	VER CAS	E.O.			
				1924, week	k ended-			
	Feb. 2.	Feb. 9	Feb. 16.	Feb. 23.	Mar. 1.	Mar. 8.	Mar. 15.	Mar. 22.
Total	78	76	74	52	49	46	57	66
New England Middle Atlantic East North Central. West North Central. South Atlantic East South Central. West South Central. Mountain Pacific	5 26 14 5 18 1 1 1	0 24 8 7 15 2 10 1	3 23 18 2 7 2 7 2 3 4 12	5 8 8 0 11 4 6 2 8	8 11 9 21 7 4 3 1 5	7 16 8 23 3 1 2 2 4	3 20 11 2 1 8 7 3 0 3 4	16 8 18 13 13 13
		INI	LUENZA	DEATH	s.			
Total	82	100	92	99	96	119	107	85
New England	3 29 18 5 5 7 10 0 5	3 33 19 6 14 13 7 2 3	5 30 13 6 17 6 11 0 4	4 36 18 4 10 12 8 2 5	3 33 14 2 2 13 10 15 2 4	5 45 19 2 15 15 15 12 4 2	10 37 23 23 7 16 8 1	5 28 13 1 3 15 9 8 2 2
		PNI	EUMONIA	DEATH	is.			
Total	1, 120	1,064	1, 125	1, 191	1, 165	1, 217	1, 194	1, 171
New England	73 463 222 64 123 62 64 21 28	73 421 216 46 134 63 53 24 34	79 407 255 52 146 65 59 30 32	87 461 226 50 171 65 71 27 33	84 469 225 249 166 55 55 19 33	73 516 221 2 59 177 61 62 14 34	85 466 240 3 66 161 55 61 31 3 29	67 495 226 1 52 152 69 56 20 34

Number of cities included in summary of weekly reports and aggregate population of cities in each group, estimated as of July 1, 1923.

Group of cities.	Number of cities reporting cases.	Number of cities reporting deaths.	Aggregate population of cities report- ing cases.	Aggregate population of cities report- ing deaths.
Total	105	97	28, 898, 350	28, 140, 934
New England	12	12	2, 098, 746	2, 098, 746
Middle Atlantic	10	10	10, 304, 114	10, 304, 114
East North Central	17	17	7, 032, 535	7, 032, 535
West North Central	14	11	2, 515, 330	2, 381, 454
South Atlantic	22	22	2, 566, 901	2, 566, 901
East South Central	7	7	911, 885	911, 885
West South Central	8	6	1, 124, 564	1, 023, 013
Mountain	9	9	546, 445	546, 445
Pacific	6	3	1, 797, 830	1, 275, 841

FOREIGN AND INSULAR.

CANARY ISLANDS.

Plague-Santa Cruz de Teneriffe.

A case of plague was reported at Santa Cruz de Teneriffe, Canary Islands, March 15, 1924.

CHINA.

Epidemic Influenza-Antung.

Information received under date of February 29, 1924, shows the presence of epidemic influenza in virulent form at Antung, China. The disease was stated to affect particularly the Japanese population of the city.

CUBA.

Communicable Diseases-Habana.

Communicable diseases have been notified at Habana, Cuba, as follows:

	March 1	March 11-20, 1924.		
Disease.	New cases. Deaths		ing under treatment Mar. 20, 1924.	
		-		
Perebrospinal meningitis			166	
Cerebrospinal meningitis Thicken pox Diptheria Eprosy Alabria			1 60 14 2 20	

¹ Isolated in the penitentiary (Presidio), 50.

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ECUADOR.

Plague-Smallpox-February 16-29, 1924.

During the period February 16 to 29, 1924, 19 cases of plague with two deaths were reported at Guayaquil, Ecuador. Plague was reported present at Santa Rosa.

During the same period a case of smallpox was reported at Guayaquil.

Plague-Infected Rats-Guayaquil.

During the period under report 18,409 rats were reported taken at Guayaquil, of which 59 rats were found plague infected.

From the interior, 13.

GERMANY.

Goiter-Spread in Wurttemberg.

Information received under date of March 1, 1924, shows spread of goiter in Wurttemberg, Germany.

GREAT BRITAIN.

Births and Deaths in Scotland, 1923.

The following tables were compiled from information contained in the "Quarterly Return of Births, Deaths, and Marriages Registered in Scotland" for the quarter ended December 31, 1923, which was issued by the Registrar General of Scotland:

Scotland-Births and deaths during the year 1923.

	Numbers.			Rates per 1,000 population.		Deaths under 1
	Births.	Total deaths.	Deaths under 1 year.	Births.	Total deaths.	year per 1,000 births.
Scotland	111, 901	63, 284	8, 825	22.8	12.9	79
Larger burghs	57, 649 19, 875 34, 377	32, 300 12, 135 18, 849	4, 909 1, 523 2, 393	24. 1 21. 1 21. 9	13. 5 12. 9 12. 0	85 77 70

Causes of deaths in Scotland during year 1923.

Cause of death.	Number of deaths.	Deaths per 100,000 population
Typhoid fever	67	1. 36
Typhus fever		. 02
Measles.	1,118	22.74
Scarlet fever		7. 16
Whooping cough		20. 12
Diphtheria	492	10. 01
Influenza	529	10.76
Lethargic encephalitis.	125	2.54
Cerebrospinal meningitis.	92	1.87
Other epidemic diseases	225	4. 58
Tuberculosis of respiratory system	3, 994	81. 25
Tuberculous meningitis	664	13, 51
Tuberculosis of intestines and peritoneum		10. 58
Other tuberculous diseases	608	12. 37
Malignant tumors	6, 373	129. 65
Rheumatic fever	174	3.54
Meningitis (not cerebrospinal or tuberculous)	550	11. 19
Apoplexy	5, 778	117. 55
Heart disease	6, 898	140. 33
Diseases of arteries	802	16. 32
Bronehitis.	3, 573	72.69
Pneumonia (all forms)	4, 675	95. 11
Other diseases of respiratory system	843	17. 15
Diarrhea and enteritis (under 2 years)	790	16. 07
Appendicitis	515	10.48
Appendicitis	453	9, 22
Nephritis, acute and chronic	1,796	36. 58
Puerperal sepsis	216	4. 39
Other diseases and accidents of pregnancy and parturition	498	10. 13
Diseases of early infancy and malformations	4, 249	86, 44
Buicide	325	6. 61
Other violent deaths	2, 146	43, 66
Other defined diseases	11, 699	238, 00
Causes ill-defined or unknown	1, 153	23, 46
All causes.	63, 284	1, 287. 44

HAWAII.

Plague-Infected Rat-Honokaa.

 Λ plague-infected rat was found March 14, 1924, at Honokaa, . Hawaii.

MADAGASCAR.

Plague Progression-July 1, 1923-January 15, 1924.

Plague was not recognized as epidemic in Madagascar during the year 1923 nor in the first two weeks of the year 1924. Reported cases and deaths from July 1, 1923, to January 15, 1924, occurring in the town and province of Tananarive, show continuous progression as follows:

Date	Cases.	Deaths.
1923.		
uly 1-15	1	1
uly 16-31	4	
Aug. 1-15	6	
Aug. 16-31	13	13
ept. 1-15	7	-
Sept. 16-30	34	31
Det. 1-15.	54	56 38
Oct. 16-31	40	38
Nov. 1-15	39	34
Nov. 16-30	50	40
Dec. 1-15	67	49
Dec. 16-31	114	96
1924.		
an. 1-15	100	88

MALTA.

Communicable Diseases-February 16-29, 1924.

Communicable diseases were reported in the Island of Malta during the period February 16 to 29, 1924, as follows: Chicken pox, 1 case; influenza, 183 cases; malaria, 1 case; pneumonia, 5 cases; undulant fever, 10 cases; whooping cough, 21 cases.

MEXICO.

Smallpox-Monterey.

On March 24, 1924, 11 cases of smallpox were officially reported present at Monterey, Mexico. The public health department was stated to be taking active preventive measures.

POLAND.

Communicable Diseases-December 9-15, 1923.

During the period December 9 to 15, 1923, communicable diseases were reported in Poland as follows:

Disease,	Cases.	Deaths.	Districts showing greatest number of deaths.
Cerebrospinal meningitis Diphtheria Messies Scarlet fever Smallpox Tuberculosis Typhoid fever Typhoid fever Typhus fever Typhus fever, recurrent Whooping cough	6 90 620 448 23 73 405 84 6	3 10 10 40 11 194 44 9	Silesia. Lodz. Lwow. Do. Krakow Warsaw. Lwow. Stanislawow. Warsaw.

Dysentery-Malaria.

During the period under report, 22 cases of dysentery with three deaths, with greatest mortality occurring in the district of Stanislawow, and 12 cases of malaria, were reported in Poland.

SPAIN.

Installation of Sanitary and Disinfecting Stations at Various Ports.

By Royal Decree dated February 25, 1924, instructions were given regarding the specifications for, and early completion of, port sanitary stations. The following is taken from the Decree:

"ARTICLE 1.

"The material and buildings at present in use by port sanitary stations, shall be completed within the shortest possible period of time so as to attain the specifications hereinafter given:

"(a) For the sanitary stations of Barcelona, Tarragona, Valencia, Alicante, Cartagena, Almeria, Malaga, Cadiz, Seville, Huelva, Vigo, Coruña, Gijon, Santander, Bilbao, Pasajes, Teneriffe, Las Palmas, Ceuta, Melilla, Mahon, Palma de Mallorca and Algeciras: A building for offices; a laboratory for clinical and hygienic analyses; a disinfecting room furnished with a gas chamber, a stove, and washing apparatus; an isolation ward for infectious patients in connection with port traffic; a consulting office for the treatment of sailors of the national and foreign merchant marines and of any sailors of the fleet who may request treatment, furnished with an emergency outfit for accidents in connection with maritime labor; an installation of baths and showers for cleansing laborers working on ships and subject to treatment and for the removal of parasites when necessary; apparatus for exterminating rats and insects and for disinfection on board ships; a gasoline or steam tender and its nautical accessories and such material for landing patients as may be necessary for all cases.

"(b) The remaining port sanitary stations shall have a building for offices; a disinfecting room; an emergency outfit; a tender and apparatus for exterminating rats and insects and for disinfection on board. The installation may be increased if the necessities of the service should demand it."

The remaining articles relate to administrative matters.

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UNION OF SOUTH AFRICA.

Summary of Plague Occurrence-Infection in Rodents.

In a public statement made under date of February 21, 1924, the minister of public health of South Africa stated that plague infection was recognized as existing among the veld rodents, with consequent infection of human beings. The total number of human cases occurring from September 16, 1923, to February 16, 1924, was stated to be 66, of which 18 were of Europeans, and the number of deaths 36, 5 of which occurred among Europeans.

Preventive Measures at Ports.

Active measures were stated to be in operation at ports for destroying rats chiefly by trapping and poisoning and preventing the migration of rats to and from vessels. It was stated that no plague in man or rodents had occurred at or near a port in the Union since 1912.

WEST AFRICA.

Plague.

Information received under date of April 2, 1924, by way of Dakar, Senegal, shows the presence of plague in West Africa.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER.

The reports contained in the following tables must not be considered as complete or final as regards either the lists of countries included or the figures for the particular countries for which reports are given.

Reports Received During Week Ended April 11, 1924. CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
India				Jan. 20-26, 1924; Cases, 2,075; deaths, 469.

¹ From medical officers of the Public Health Service, American consuls and other sources.

Reports Received During Week Ended April 11, 1924—Continued.

PLAGUE.

Place.	Date.	Cases.	Deaths.	Remarks.
Ceylon:	Feb. 17-23	6	5	One plague rodent.
Ecuador: Guayaquil	Feb. 16-29	19	2	Rats taken, 18,409; found in fected, 59.
Santa RosaIndia	do			Present. Jan. 20-26, 1924; Cases, 5,383
Karachi	Feb. 24-Mar. 1do		30	deaths, 3,930.
Bagdad	Feb. 10-16		1	July 1-Dec. 31, 1923: City and
				Province: Cases, 429; deaths, 367.
Do Straits Settlements:				Jan. 1-15, 1924: City and Prov- ince: Cases, 100; deaths, 88.
Singapore	Feb. 10-16	1		Sept. 16, 1923-Feb. 16, 1924: Cases, 66; deaths, 36. (Euro-
West Africa	*********			pean cases, 18; deaths, 5.) Apr. 2, 1924: Reported present in one locality.
	SMAL	LPOX.	-	1
Canada: Alberta—				
Calgary Manitoba—	Mar. 16-22	8		
Winnipeg Ceylon:	Mar. 16-29	11		
ColomboChile:	Feb. 17-23	2	1 2	
Valparaiso China: Canton.	Jan. 13-19 Jan. 13-Feb. 23			Present.
Chungking Manchuria— Harbin	Feb. 3-16 Feb. 19-25	7	*******	Do.
Shanghai Dominican Republic:	Feb. 9-Mar. 1	8	24	Cases, foreign; deaths, Chinese and foreign.
La Romana Ecuador: Guayaquil	Feb. 24-Mar. 1	1		
Egypt: Cairo	Feb. 16-29	1	1	
Gibraltar India Karachi	Mar. 3-9 Feb. 24-Mar. 1	1	3	Jan. 20-26, 1924: Cases 2,075; deaths, 469,
Madras	do	22	1	action, see
apan: Kobe	Feb. 10-16	2	1	
Taiwan Island	Feb. 20-29 Mar. 9-15	1	2	
Mexico City	Feb. 24-Mar. 1	5		On Mar. 24, 1924, 11 cases
	Mar. 16-22		1	officially announced. Dec. 9-15, 1923: Cases, 23; deaths, 11.
Portugal: Oporto	Mar. 9-15	8	4	
Bangkok	Feb. 3-0	2	1	
yria:	Feb. 24-Mar. 1 Feb. 18-24	2		
'unis:	11-110		2	

Reports Received During Week Ended April 11, 1924—Continued.

TYPHUS FEVER.

Place.	Date.	Cases.	Deaths.	Remarks.
Chile: Valparaiso China: Chungking	Jan. 13-26 Feb. 3-16		5	Present.
Mexico: Mexico City Netherlands: Amsterdam	Mar. 6-12	7 2		
Palestine: Jaffa Jerusalem Poland	Feb. 26 Feb. 28	1		Dec. 9-15, 1923: Cases, 84; deaths,
Yugoslavia: Crontin— Zagreb	Feb. 17-23	1		9. Recurrent typhus, 6 cases.

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Reports Received from December 29, 1923, to April 4, 1924.1

CHOLERA.

China: Hongkong	Nov. 18-21	1		
India				Oct. 14-Dec. 22, 1923; Cases, 14,-
Do				117; deaths, 9,148. Dec. 30, 1923-Jan. 19, 1924; Cases,
	Dec. 23-29	1	1	3,714; deaths, 2,379.
Do	Feb. 3-16	17	17	5,114, deatens, 2,519.
Calcutta	Nov. 11-Dec. 29	83	60	
Do	Dec. 30-Feb. 23	177	149	
Madras	Nov. 25-Dec. 20	15	5	
Do		22	10	
Rangoon	Nov. 11-Dec. 29	8	5	
Do	Feb. 3-16	3	3	
Indo-China:				
Saigon	Dec. 31-Jan. 5	1	1	Including 100 square kilometers
Philippine Islands:				in surrounding country.
Manila	Feb. 3-9			
Siam:	reb. 5-5	1		
Bangkok	Nov. 18-Dec. 8	4	9	
Do	Dec. 31-Jan. 19	6	4	
Turkey:	2001 01 011111 10:111		-	
Constantinople	Dec. 2-8		1	

PLAGUE.

Azores: St. Michael Island	Oct. 20-Nov. 10	9	5	At localities 3 to 9 miles from port
Bolivia:				of Ponta Delgada.
La Paz	Oct. 1-31		3	
Brazil:	Wett 2 032222222			
Bahia	Nov. 11-Dec. 22	5	3	
Do	Dec. 30-Jan. 19	4	5	
Porto Alegre	Feb. 10-16		1	
Rio de Janeiro	Jan. 20-26	1		
British East Africa:				
Kenya-			1	
Mombasa	Oct. 14-20	1	1	Infected rats, 2. Dec. 9-15, 1923;
Do	Dec. 30-Jan. 5	1	1	Cases, 4; deaths, 2; removed from vessel arrived Dec. 11, 1923.
Nairobi	Nov. 1-21	40		In rural districts, several hun-
		10		dred.
Tanganyika			1	To Nov. 24, 1923; Cases, 19;
Uganda	Aug. 1-Oct. 31	734	719	deaths, 25.
Entebbe	Oct. 1-Nov. 30	191	183	

¹ From medical officers of the Public Health Service, American consuls, and other sources.

Reports Received from December 29, 1923, to April 4, 1924-Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Canary Islands:				
Las Palmas	Oct. 15-Nov. 15	14	14	
Santa Cruz de Teneriffe	Feb. 19	2		
San Juan de la Rambia	Dec. 11	1		Locality 52 km. from Teneriffe
Celebes Island	Nov. 30			Epidemic.
Ceylon:				
Colombo	Nov. 11-Dec. 29	31	21	Plague rodents, 24.
Do	Dec. 30-Feb. 16	62	59	Plague rodents, 28.
China:	Dec 16.00			Present
Nanking	Dec. 16-29 Dec. 30-Feb. 9			Present. Do.
Do Ecuador:	Dec. so reb. v			. Du.
Guayaquil	Nov. 16-Dec. 31	45	13	Rats taken, 53,240; found in
orange against the second			-	fected, 133.
Do	Jan. 1-31	50	16	Rats taken, 36,650; found in
			-	fected, 247.
Do	Feb. 1-15	21	7	Rats taken, 20,479; found in fected, 90.
Jipijapa	Nov. 16-Dec. 15			Present.
Quevedo	Nov. 16-Dec. 15 Jan. 1-31	3	2	
Quito	Nov. 1-30	11	1	
Vino del Milagro	Dec. 1-15	1		
Egypt				Jan. 1-Dec. 31, 1923: Cases, 1,519 deaths, 725. Jan. 1-Feb. 28 1924: Cases, 39; deaths, 24.
City-	Vana 1000	0.	99	deaths, 725, Jan. 1-Feb. 28
Alexandria	Year 1923do	65	33	1924: Cases, 39; deaths, 24.
Cairo Port Said	do	51	29	
	do	46	24	
Do	Jan. 2-Feb. 16	6	3	1924.
Province-	Jan. 2-1 CO. 10			1041.
Assiout	Year 1923	370	211	
Beni-Souef	do	63	23	*
Charkieh	Jan. 31	1	1	1924.
Dakhalieh	Year 1923	2	2	
Fayoum	do	34	9	
Do	Feb. 18	1	1 9	1924.
Gharbieh	Year 1923	23 337	193	
Girgeh	Jan. 17-Feb. 11	337	2	1924.
Do	Year 1923	3	4	1021.
Gizah	do	76	10	
Do	Jan. 6	1		1924.
Kena	Year 1923	50	34	
Menoufieh	do	290	98	
Do	Jan. 2-Feb. 23 Vear 1923	26	16	1924.
Minia		106	44	1004
Do	Feb. 5	1	1	1924.
Iawaii: Honokaa				Jan. 8-10, 1924: Three plague-in-
Honokaa				fected rodents.
Paauhau				Dec. 14, 1923; One plague rat.
				Dec. 14, 1923; One plague rat. Feb. 14, 1924; One plague rat. Oct. 14-Dec.29, 1923; Cases, 34,542;
ndia				Oct. 14-Dec.29, 1923: Cases, 34, 542;
				deaths, 23,778.
Do				Dec. 30, 1923-Jan. 19, 1924: Cases,
				11,425; deaths, 8,385.
Bombay	Oct. 28-Dec. 22	5	5	
Do	Dec. 30-Feb. 2	6	1	
Calcutta	Dec. 23-29 Jan. 6-Feb. 23	1 2	2	
Do	Nov 11-Dec 20	42	33	
Do	Nov. 11-Dec. 29 Dec. 30-Feb. 23	5	2	
Madras Presidency	Nov. 4-Dec. 29	1, 657	1,021	
Do	Nov. 4-Dec. 29 Jan. 27-Feb. 23	504	313	
Rangoon	Jan 27-Feb. 16	20	15	
Do	Dec. 30-Feb. 16	50	48	
ndo-China:	0.000			T-1-11-100 100
Suigon	Oct. 28-Dec. 8	19	6	Including 100 square kilometers in surrounding country.
Do	Jan. 27-Feb. 2	1 -		Do.
raq:	Nov. 11-Dec. 29			
Bagdad	Jan. 6-21	9	6 3	
Do	Jun. 0-21	- 1	0	Oct. 1-Dec. 31, 1923: Deaths,
Province-	***************************************			2,908.
Djokjakarta	Oct. 1-Dec 31		146	-1
Kedoe			1, 287	
***************************************	do		150	

Reports Received from December 29, 1923, to April 4, 1924—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Java-Continued.				
Province—Continued. Samarang	Oct. 1-Dec. 31		430	
Soerabaya	Dec. 26-Jan. 19		9 23	
Do Soerakarta	dodo	23	000	
Madagascar:				
Tananarive Province	Oct. 1-Dec. 31	324 74	272 74	Bubonic, pneumonic, septicemic
Do	Feb. 4			Country districts in vicinity
Paraguay:				stated to be plague infected.
Asuncion	Dec. 18	6	4	
Peru				Nov. 1-Dec. 31, 1923: Cases, 38 deaths, 24. Jan. 1-31, 1923 Cases, 37; deaths, 15.
Locality— Callao	Jan. 1-31	2		deaths, 24. Jan. 1-31, 1924
Canete	Nov. 1-30.	1	1	Cases, or, destris, 10.
Chancay	Dec. 1-31	2		
Chepen	Nov. 1-30 Nov. 1-Dec. 31	1 2	1	
Chilea	Jan. 1-31	1		
Huarmey	do	6		
Lima (city)	Nov. 1-Dec. 31 Jan. 1-31	22 25	15 14	
Lima (country)	Nov. 1-Dec. 31	8	7	
Do	Jan. 1-31	3 2	1	
Portugal:	do	2	*******	
Lisbon	Dec. 13-21 Dec. 31-Jan. 6	7		
Portuguese West Africa: Angola—	Dec. 31-Jan. 6	******	1	
Ru-sia:		59	23	
Bukeeve Province				Oct. 1, 1923-Feb. 4, 1924: Cases 319; deaths, 294. 66 plague centers.
Ural Provinces		*******		Oct. 1, 1923-Feb. 4, 1924: Cases 441. 4 plague centers.
Siam: Bangkok	Nov. 4-Dec. 8	3	2	
Do	Jan. 13-19	1	1	
Siberia: Transbaikalia—				
Chita	Jan. 27	2	2	Pneumonic. Occurring in vet erinary laboratory workers
Spain:				etimay isomatory workers.
Malaga	Dec. 1-31	4	*******	
Straits Settlements: Singapore	Nov. 11-Dec. 22	4	4	
Do	Nov. 11-Dec. 22 Dec. 30-Feb. 9	10	8	
Syria:	Nov. 1-Dec. 10	3		
Beirut	Jan. 1-10	1		
Turkey:		- 1		
Constantinople Union of South Africa: Cape Province—	Dec. 2-22	6	3	
Uitenhage district	Dec. 9-15			Plague rodent found in vicinity
Orange Free State				Haarhoff's Kraal farm.
				tharnout's Kraai farm. Jan. 27-Feb. 9, 1924: Cases, 30; deaths, 13. (White cases, 6; colored cases, 24; deaths, 13). Feb. 10: Death of case (white) previously reported Total, Dec. 16, 1923-Feb. 9, 1924: Cases, 54; deaths, 29. (White cases, 17; deaths, 24.)
Hoopstad district	Feb. 3-9	1		
Kroonstad district	Feb. 3-9 Dec. 16-27 Jan. 6-Feb. 9	43	3 20	Cases, 24; deaths, 15, reported since outbreak.
Winburg district	Feb. 3-9	1	20	
Wonderfontein farm	Dec. 2-8	4		Vicinity of Hoopstad. At Hoop- stad, Dec. 9-15, 1923, one death of case previously reported.
On vessels:				
	Dec. 11	4 2	2	At Mombasa, BritishEast Africa.
***************************************	Jan. 68	2		At Varna, Bulgaria, from Syrian

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Reports Received from December 29, 1923, to April 4, 1924—Continued. SMALLPOX.

Place.	Date.	Cases.	Deaths.	Remarks.
Algeria:				
Algiers	Nov. 1-30	1		
Arabia:				
Aden	Dec. 16-22	1		Imported.
Do	Jan. 13-19	1		
Belgium: Brussels	do	10		
Brussels	do	10		
La Paz	Oct. 1-Dec. 31	45	15	
Do	Jan. 1-31	6	2	
Brazil:	Juli. 1 01		-	
Bahia	Jan. 6-12	2		
Pernambuco	Nov. 4-Dec. 1	15	3	
Do	Jan. 6-Feb. 16		7	
Porto Alegre	Dec. 23-29		. 1	
Do	Dec. 30-Feb. 16		. 1	
Rio de Janeiro	Nov. 18-24	3	4	
Do	Jan. 6-26	3	1	
Sao Paulo	Sept. 3-9	1		
British East Africa:				
Tanganyika Territory	Sept. 30-Oct. 27 Nov. 25-Dec. 29	14	1	
Do	Nov. 25-Dec. 29	8	3	
Uganda	Sept. 1-30	6	1	
Entebbe	Oct. 1-Nov. 30			Cant 1 20 1002; In anna 07 mile
Zanzibar	Sept. 1-Oct. 31	116	18	Sept. 1-30, 1923: In areas 27 mile from town of Zanzibar. Oct 1-31, 1923: In vicinity, 1 case 1 death. In Mikotoni dis trict, 30 cases, 14 deaths re ported.
Canada:				portous
Alberta-				
Calgary	Jan. 27-Mar. 15	27		
British Columbia—				
Vancouver	Dec. 22-29 Dec. 30-Feb. 23 Feb. 10-Mar. 1	10		
Do	Dec. 30-Feb. 23	54		
Victoria.	Feb. 10-Mar. 1	2		
Manitoba—				
Winnipeg	Nov. 25-Dec. 29	21		
Do	Dec. 30-Mar. 8	60		
New Brunswick-				D. L. 4 00 4004 G 4
Frederickton	34 0.6			Feb. 1-29, 1924: Cases, 8.
Gloucester County	Mar. 2-8	1		
Madawaska County Restigouche County	Dec. 8-15	1		Ion 1 Feb 00 1004: Come 9
Victoria County	Feb. 10-16	2		Jan. 1-Feb. 29, 1924: Cases, 3.
Westmoreland County.	do	3	******	
Ontario.		0		Jan. 1-Feb. 29, 1924: Cases, 176,
Fort William and Port	Dec. 16-29	3		Occurring at Fort William.
Arthur.		-		
London	Feb. 3-Mar. 15	3		
North Bay	do	1		
Perth	Mar. 4. Jan. 17-Mar. 22	3		
Toronto	Jan. 17-Mar. 22	4		
Windsor	Feb. 1-Mar. 15	52	11	
Quebec-				
Montreal	Nov. 30-Feb. 23	7		
Saskatchewan—				
Regina	Dec. 9-15	1		
Do	Dec. 30-Feb. 23	6	1	
eylon:				-
Colombo	Nov. 11-17	1		Port case.
Do	Jan. 20-Feb. 2	5	1	
hile:	You # 10			
Antofagasta	Jan. 6-19	4	1	
Concepcion	Oct. 1-Dec. 31	3	14	Dec. 22, 1923: Five cases present.
Valparaiso	Nov. 26-Dec. 2 Dec. 9-15	3	1	Dec. 22, 1920. Five cases present.
Vaiparaiso	Lett. 9-10		1	
Amoy	Nov. 18-Dec. 8			Present.
Do			9	Including Kulangsu, 14 deaths;
***************************************	Jun. 0-1 CD. 10		9	and in hospital, Feb. 9, 1924,
				more than 30 cases stated to
				be present.
Antung	Dec. 31-Feb. 3	2	2	Processing
Canton	Dec. 23-Jan. 13			Present.
				Present and endemic.

Reports Received from December 29, 1923, to April 4, 1924-Continued.

SMALLPOX-Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
China—Continued.				
Chungking	Dec. 30-Feb. 2	1		Present.
Foochow.	Nov. 4-Dec. 15			Do.
Do	Dec 21-Feb 2	1		Do.
	Oct. 28-Dec. 29	718	630	100.
Hongkong	Dec. 30-Jan. 19	292		
Do	Dec. 30-Jan. 19	292	322	
Manchuria-	D 01 7 00			
Dairen	Dec. 31-Jan. 20	2		
Harbin	Nov. 12-Dec. 22	36		
Do	Jan. 1-Feb. 18	9	5	
Nanking	Dec. 2-15 Dec. 30-Jan. 26			Do.
Do	Dec. 30-Jan. 26.			De.
Shanghai	Dec. 29			Prevalent.
Do	Jan. 6-Feb. 9	19	41	Cases, foreign.
Chosen (Korea);		1		
Chemulpo	Jan. 1-31	1		
Carel	Nov 1-20	i		
Seoul	Nov. 1-30			
Colombia:				
Buenaventura	Nov. 18-Dec. 15	8		
Costa Rica:				1
Port Limon	Feb. 18-24	1		
zechoslovakia				Oct. 1-Dec. 31, 1923; Cases, 1
Zechosiovakia				deaths, 1; occurring in Slovakia
Dominican Republic:				deaths, 1, occurring in Biovakia
	T 07 F-1 0			
La Romana	Jan. 27-Feb. 2	8		
Ecuador:				l .
Esmeraldas	Nov. 16-30	4		
Guayaquil	Dec. 1-31	1		
Do	Jan. 1-Feb. 15	2		
Quito	Nov. 1-30	167	26	
			-	
Egypt: Port Said	Nov. 24-Dec. 2	1		
Sthonia				Nov. 1-Dec. 31, 1923: Cases, 38.
Sthoma				
				Jan. 1-31, 1924: Cases, 9.
rance:				D. U.S.
Cherbourg	Feb. 9-15	1		British seaman.
reat Britain:		-		
Liverpool	Mar. 2-8	1		In family of seaman recently re-
				turned from Oporto, Portugal.
reece:				
Saloniki	Oct. 22-Dec. 30		11	
Do	Dec. 31-Jan. 27	2	1	
auadeloupe (West Indies)	Decr of June 1			Jan. 2-16, 1924: Present.
ruadeloupe (west indies)				Present. Vicinity of Point &
Abymes	Feb. 16	******		Ditan
				Pitre.
Basse Terre	Dec. 18			Pitre. Present.
Basse Terre	Dec. 18			Pitre. Present. Do.
	Dec. 18			Pitre. Present. Do. Off shore island; present.
Basse Terre Do Marie Galante Island	Dec. 18			Pitre. Present. Do.
Basse Terre	Dec. 18 Jan. 12-Feb. 16 Dec. 18 Feb. 16 Jan. 12-Feb. 16			Pitre. Present. Do. Off shore island; present.
Basse Terre	Dec. 18 Jan. 12-Feb. 16 Dec. 18 Feb. 16 Jan. 12-Feb. 16			Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present.
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre.	Dec. 18			Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases.
Basse Terre	Dec. 18. Jan. 12-Feb. 16 Dec. 18. Feb. 16. Jan. 12-Feb. 16 Dec. 18			Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present.
Basse Terre	Dec. 18 Jan. 12-Feb. 16 Dec. 18 Feb. 16 Jan. 12-Feb. 16 Dec. 18 Feb. 3-9.	3		Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present.
Basse Terre Do. Marie Galante Island Do. Moule Point à Pitre Iaiti: Cape Haitlen Hinche	Dec. 18	3 1		Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases, Present in vicinity.
Basse Terre	Dec. 18	3 1 2		Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present in vicinity. Developed at Limbe, Haiti
Basse Terre	Dec. 18	3 1 2		Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present in vicinity. Developed at Limbe, Haiti
Basse Terre	Dec. 18	3 1 2		Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present in vicinity. Developed at Limbe, Haiti
Basse Terre	Dec. 18	3 1 2		Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present in vicinity. Developed at Limbe, Haiti
Basse Terre	Dec. 18	3 1 2		Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases,
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre Iaiti: Cape Haitlen Hinche Port au Prince ndia Do.	Dec. 18	3 1 2	1	Pritre. Present. Do. Off shore island; present. Present. Estimated 60 cases, Present in vicinity.
Basse Terre	Dec. 18	3 1 2	1	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases,
Basse Terre Do. Marie Qalante Island Do. Moule Point & Pitre Isiti: Cape Haitien Hinche Port au Prince ndia. Do. Bombay Do.	Dec. 18	3 1 2 2 55 210	1 25 98	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre Haiti: Cape Haitlen Hinche Port au Prince ndia Do. Bombay Calcutta	Dec. 18	3 1 2 2 55 210 4	1 25 98	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases,
Basse Terre Do. Marie Qalante Island Do. Moule Point à Pitre Isiti: Cape Haitien Hinche Port au Prince ndia Do. Bombay Do. Calcutta Do. Do. Do. Do. Do. Do.	Dec. 18	3 1 2 55 210 4 5	25 98 4 5	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases,
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre Iaiti: Cape Haitlen Hinche Port au Prince ndia Do. Bombay Do. Calcutta Do. Karachi	Dec. 18	3 1 2 55 210 4 5 5 18	25 98 4 5	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Galante Island Do. Moule. Point & Pitre. laiti: Cape Haitlen Hinche. Fort au Prince India. Do. Bombay Do. Calcutta Do. Karachi Madras	Dec. 18	3 1 2 55 210 4 4 5 188 23	25 98 4 5 2 3	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Galante Island Do. Moule. Point & Pitre. laiti: Cape Haitlen Hinche. Fort au Prince India. Do. Bombay Do. Calcutta Do. Karachi Madras	Dec. 18	3 1 2 55 210 4 5 5 18	25 98 4 5	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923; Cases 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924; Cases
Basse Terre Do. Marie Qalante Island Do. Moule Point & Pitre Isiti: Cape Haitlen Hinche Port au Prince ndia. Do. Bombay Do. Calcutta Do. Karachi Madras Do. Do. Do. Do. Do. Do. Do. Do.	Dec. 18	3 1 2 55 210 4 5 18 23	25 98 4 5 2 3	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre Iaiti: Cape Haitlen Hinche Port au Prince ndia Do. Bombay Do. Calcutta Do. Karachi. Madras Do. Rangoon	Dec. 18	3 1 2 2 55 210 4 5 18 23 74 12	25 98 4 5 2 3 4	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Qalante Island Do. Moule Point & Pitre Isiti: Cape Haitlen Hinche Port au Prince India Do. Bombay Do. Calcutta Do. Karachi Madras Do. Rangoon Do. Do. Calcund Do. Calcutta Do.	Dec. 18	3 1 2 55 210 4 5 18 23	25 98 4 5 2 3	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases.
Basse Terre Do. Marie Galante Island Do. Moule Point & Pitre Haiti: Cape Haitlen Hinche Port au Prince ndia Do. Bombay Do. Calcutta Do. Karachi Madras Do. Rangoon Do. Bangoon Do. Rangoon Do. India	Dec. 18	3 1 2 2 55 210 4 5 18 23 74 12	25 98 4 5 2 3 4	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases,
Basse Terre Do. Marie Qalante Island Do. Moule Point à Pitre. Iaiti: Cape Haitlen Hinche Port au Prince India Do. Bombay Do. Calcutta Do. Karachi Madras Do. Rangoon Bobo Colcuita Do. Robo Colcuita Do. Robo Colcuita Do. Colcuit	Dec. 18	55 210 4 5 18 23 74 12 7	25 98 4 5 2 3 4 4	Pitre. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases, 4,235; deaths, 1,341.
Basse Terre	Dec. 18	3 1 2 2 55 210 4 5 18 23 74 12	25 98 4 5 2 3 4	Prite. Present. Do. Off shore island; present. Present. Estimated 60 cases. Present. Present in vicinity. Developed at Limbe, Haiti. Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241. Dec. 30, 1923-Jan. 19, 1924: Cases, 4,235; deaths, 1,341. Including 100 square kilometers

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Reports Received from December 29, 1923, to April 4, 1924—Continued.

SMALLPOX-Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Iraq:				
Bagdad	Oct. 24-Dec. 29 Dec. 30-Jan. 28	46		
Italy:	Park 17 00			
Trieste	Feb. 17-23 Feb. 18-24	1 1		-
Turin	Feb. 18-24	1		Nov. 25 Dec 20 1003 Come 115
Do	***************************************		-	Nov. 25-Dec. 29, 1923: Cases, 115. Dec. 30, 1923-Feb. 16, 1924: Cases,
Kingston	Nov. 25-Dec. 29	3		153. Reported as alastrim.
Do	Dec. 30-Feb. 2	6		
Japan:	71. 11.00	-		
Kobe	Feb. 14-29	7	. 1	1
Taiwan	Jan. 1-Feb. 3	79		
Java:	Vali. 1 1 00: 0			i
East Java—				1
Soerabaya	Oct. 23-Dec. 29			
Do	Dec. 30-Jan. 19	67	13	
West Java— Batavia	Oct 97 Dec 90	65	1 12	
Do	Oct. 27-Dec. 28 Dec. 29-Jan. 18			4
Latvia	Dec. 25-Jan. 18	19		
A40 7 60 A 8 8 8 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9				Oct. 1-31, 1923: Cases, 3. Nov. 1-30, 1923: Cases, 1, Dec. 1-31, 1923: Cases, 2.
Mexico:				
Guadalajara	Jan. 27-Feb. 23 Dec. 4-10		. 3	
Manzanillo	Dec. 4-10	5		
Mexico City	Nov. 25-Dec. 70	32		Including municipalities in Federal District.
Do	Jan. 30-Feb. 23	70	23	Do.
Salina Cruz Tampico	Jan. 1-31 Jan. 21-Feb. 29 Nov. 3-Dec. 30	24		From Irapuato, 9; La Barra, 1.
Vera Cruz	Nov. 3-Dec. 30		4	From frapuato, 9, La Barra, 1.
Do	Jan. 6-27	1	2	
Netherlands:				
Rotterdam	Jan. 20-26	3		
Palestine:	You 17 00			
Jaffa. Jerusalem.	Jan. 15-28 Feb. 18-25	3		
Persia:	r 60, 10 ad			
Teheran	Sept. 24-Dec. 23		4	
Poland				Sept. 23-Dec. 8, 1923: Cases, 11
D41				deaths, 7.
Portugal:	Non 11 Dec 00	19	10	Corrected report.
Lisbon	Nov. 11-Dec. 29 Dec. 31-Mar. 1	67	10	Corrected report.
Oporto	Nov. 25-Dec. 29	39	23	
Do	Nov. 25-Dec. 29 Dec. 30-Mar. 8	65	39	
Portuguese East Africa:				
Lourenco Marques	Dec. 30-Jan. 5	2		
Russia: Ukraine				Assessed 1000: Carro
C Krathe	*************	*******		August, 1923: Cases, 77. Sep- tember, 1923: Cases, 66.
Slam:				tember, 1925. Cases, 66.
Bangkok	Oct. 28-Dec. 8	33	18	Nov. 25-Dec. 1, 1923: Epidemic.
Do		2	1	
Siberia:				
Dauria Station	Oct. 21	*		Present. Locality on Chita Rail-
Sierra Leone:				way, Manchurian frontier.
Sherbro District—			1	
Tagbail	Nov. 1-15	3		
pain:	1101. 1-10	1	***********	
Barcelona	Nov. 15-Dec. 26		2	
Do	Jan. 3-9		2	
Valencia	Nov. 25-Dec. 29	152	12	
Do Straits Settlements:	Dec. 30-Mar. 8	233	25	
Straits Settlements: Singapore	Dec 16-90	2	1	
Do	Dec. 16-29 Dec. 30-Jan. 26	3	1	
witzerland:	arti oo san su			
Basel	Jan. 27-Feb. 9	4		Corrected.
Berne	Nov. 17-Dec. 22	15		
Do	Jan. 6-Feb. 16	11		
Lucerne	Nov. 1-30			
Zurich	Dec. 1-31			
euricu	Jan. 27-Feb. 2	1	*******	

Reports Received from December 29, 1923, to April 4, 1924—Continued.

SMALLPOX-Continued.

	SMALLPOX	-Cont	mueu.	
Place.	Date.	Cases.	Deaths.	Remarks.
Syria:				To all delites of Different Charles
Aleppo	Nov. 25-Dec. 1	1		In vicinity, at Djisr Choughour
Beirut	Jan. 21-31 Nov. 16-Dec. 15	7	*********	
Do	Jan. 29-Feb. 12	15		
Tunis:				
Tunis	Oct. 27-Nov. 2 Jan. 8-Feb. 4	5 3	1 2	
Turkey: Constantinople	Nov. 11-Dec. 8	3		
Union of South Africa	Jan. 6-Feb. 16	1	1	Oct. 1-31, 1923: Colored, cases
	O-4 00 Dec 0			41; deaths, 2; white, cases, 3 Outbreaks.
Cape Province	Oct. 28-Dec. 8 Jan 20-Feb 9			Do.
DoNatal	Jan. 20-Feb. 9 Oct. 28-Nov. 3			Do.
Northern Rhodesia	Dec. 4-31	40	5	
Do			*********	Jan. 1-31, 1924: Cases, 50; deaths 11; reported from Balovale Kalabo, and Mankoya dis
Orange Free State	Oct. 28-Nov. 24			tricts. Outbreaks.
Do	Jan 20-Feb 2			Do.
Transvaal	Nov. 18-Dec. 1 Nov. 25-Dec. 15			Do.
Johnannesburg	Nov. 25-Dec. 15	3	********	Do.
Do Uruguay: Montevideo	Feb. 3-9 Oct. 1-31	1		100.
Venezuela: Caracas	Jan. 22			Epidemic.
On vessels: 8. S. Torres	Jan. 14	1		At New Orleans quarantine sta
				tion from Tampico, Mexico via ports. Case in seamat signed on at Galveston, Tex. on outward voyage.
S. S. Tupper	Jan. 20-26	1		At Gonaives, Haiti.
S. S. Vasari	Dec. 31	1	**********	At Gonaives, Haiti. At Trinidad, West Indies, fron Buenos Aires, Argentina. Ves sel left Buenos Aires Dec. 15 1923, for New York, via Santos Rio de Janeiro, Trinidad, Bar bados.
Sch. Annie M. Parker	Jan. 23	3		At sea. Vessel abandoned and crew removed to vessel bound for Rotterdam. Patients re moved at Liverpool. Feb. 28 bound for Newfoundland.
	TYPHUS	FEVE	R.	
Algeria:			,	
Algiers	Nov. 1-Dec. 31 Jan. 1-Feb. 10	8	3 5	
Bolivia: La Paz	Oct. 1-Dec. 31	43	5	
Do	Jan. 1-31	4	1	
Bulgaria: Sofia		******		Nov. 18-Dec. 15, 1923: Paraty
				Nov. 18-Dec. 15, 1923: Paraty phus fever, cases, 17. Jan 6 Feb. 9, 1924: Paratyphus fever cases, 6.
Canary Islands: TeneriffeChile:	Jan. 14-Feb. 17		2	
Antofagasta	Dec. 2-8	4		
Concepcion	Oct. 1-Nov. 30		4	Dec. 11-24, 1923: Deaths, 3.
Do	Jan. 8-28	2	2	In district, at 12 localities, 9
Iquique	Jan. 20-26		1	cases.
Talcahuano Do	Dec. 31-Feb. 23	4		Dec. 5, 1923: 3 cases under treat ment. Jan. 12, 1924: 1 case
Valparaiso	Nov. 25-Dec. 15		29	under treatment. Dec. 24, 1923: In hospital, 3
Do	Dec. 30-Jan. 12		15	cases. Reports from two districts of the

Reports Received from December 29, 1923, to April 4, 1924—Continued.

TYPHUS FEVER-Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Antung	Nov. 12-Dec. 30	. 5		
Chungking	Nov. 18-24			Present.
Do	Dec. 16-29			Endemic.
Do	Dec. 30-Jan. 26			Do.
Czechoslovakia				OctDec., 1923: Cases, 21.
Danzig-Polish frontier:		1		
Mühlbanz	Mar. 6			Present. Origin stated to be focus at Mallinia.
Ecuador:		1		Total at Manning.
Quito	Nov. 1-30	14	1	
Egypt: Alexandria	Nov. 19-Dec. 23	3		
Do	Jan. 8-Feb. 25	4		
Cairo	Sept. 10-Dec. 31	39	- 11	
Esthonia				Nov. 1-30, 1923: Paratyphu fever, cases, 8. Dec. 1-31, 1923 Typhus fever, cases, 15. Para typhus, cases, 4. January
Finland				1924: Paratyphus fever, 6 cases Dec 1-15, 1923; Paratyphus
Gormany.		1		fever, cases, 15.
Coblenz	Jan. 27-Feb. 2	1		,,
Greece:		1	_	
Greece: Athens Saloniki	Jan. 11-Feb. 20 Nov. 26-Dec. 30	7	7 3	
Hungary				July 1-Aug. 31, 1923: Cases, 24
Budapest Java: East Java—	Jan. 27-Feb. 23	13	7	
Soerabaya	Dec. 9-29	12		
Latvia	Dec. 30-Jan. 5	2	********	Oct 1-21 1023: Cones 10: none
				Oct. 1-31, 1923: Cases, 12; para typhus fever, 7; recurrent ty- phus, 3. Nov.1-30, 1923: Case 1; paratyphus fever, 2 cases Dec. 1-31, 1923: Cases, 9; para- typhus, cases, 3.
Mexico: Durango	Dec. 1-31		2	
Do	Jan. 1-Feb. 29		3	
Guadalajara	Jan. 27-Feb. 16		2	
Mexico City	Nov. 25-Dec. 29	86		Including municipalities in Fed-
D.	The 20 Feb 02	90	8	eral district. Do.
Do.	Dec. 30-Feb. 23 Jan. 17-23	39	1	170.
San Luis Potosi	Feb. 1-29		2	
Torreon	F CO. 1-29		-	
Stavanger	Dec. 25-31	1		
Jaffa	Jan. 1-21	3		
Jerusalem		1		
Persia:				
Teheran Poland	Sept. 24-Oct. 23			Sept. 23-Dec. 8, 1923; Cases, 581; deaths, 49; recurrent typhus,
Portugal:				cases, 49; deaths, 1.
Oporto	Jan. 27-Feb. 2	2		
Rumania: Kishineff District	Nov. 1-Dec. 31	15	******	
Russia: Ukraine				August 1923: Cases 454 Son
	,			August, 1923: Cases, 454. Sep- tember, 1923: Cases, 314. Re- current typhus: August, 1923; cases, 1366. September, 1923; cases, 941.
Spain:	M 00 75 10	1		
Barcelona	Nov. 29-Dec. 12		2	
Do	Jan. 3-Feb. 13		5	
Madrid	Dec. 1-31		7	
Damascus	Ion 27-Feb 2	1		
Tunis:				
Tunis	Feb. 5-11	1		

Reports Received from December 29, 1923, to April 4, 1924—Continued.

TYPHUS FEVER-Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Turkey:				
Constantinople	Nov. 11-Dec. 29			
Union of South Africa	Dec. 30-Jan. 20	0	********	Oct. 1-31, 1923: Colored, 287
Chick of Courts at the Court of				cases, 58 deaths; white, 2 cases
Cape Province				total, 289 cases, 58 deaths.
Cape Province	******	******		Oct. 1-31, 1923: Colored, cases, 245; deaths, 47.
Do	Oct. 28-Dec. 8			Outbreaks.
Do				Do.
Natal			*******	Oct. 1-31, 1923: Colored, cases, 4; deaths, 3.
Do	Oct. 28-Nov. 3			Outbreaks.
Do	Jan. 27-Feb. 2			Do.
Durban	Nov. 24-Dec. 1	73		Cases occurring among native
				stevedores in the harbor area of the port and confined to one
	. *			barracks.
Orange Free State			******	Oct. 1-31, 1923: Colored, cases ,25;
Do	Dec 15			deaths, 8. Outbreaks.
Do				Do.
Kroonstad District	Jan. 20-26			Outbreaks on two farms.
Transvaal				Oct. 1-31, 1923: Colored, cases, 13.
Do				Outbreaks.
Johannesburg			4	
Do	Jan. 6-Feb. 16	7		
Potschefstrom District.	Jan. 20-26			Outbreaks on seven farms.
Venezuela: Maracaibo	Dec. 16-22		1	
Do	Feb. 17-Mar. 1		2	
Yugoslavia:	* ******		-	
Croatia-				
Zagreb	Dec. 2-15	3		
Belgrade	Nov. 25-Dec. 1	1		

YELLOW FEVER.

Pernambuco City	Brazil:			
	Pernambuco City	Nov. 16	3	2